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| Fill in this information to identify your case: |                               |                                   |
|---|-------------------------------|-----------------------------------|
| United States Bankruptcy Court for the:         |                               |                                   |
| NORTHERN DISTRICT OF ILLINOIS                   |                               |                                   |
| Case number (if known)                          | Chapter you are filing under: |                                   |
|   | Chapter 7                     |                                   |
|   | ☐ Chapter 11                  |                                   |
|   | ☐ Chapter 12                  |                                   |
|   | ☐ Chapter 13                  | ☐ Check if this an amended filing |

B 101

## Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Pa | Identify Yourself  |  |   |                               |   |
|----|--|--|---|-------------------------------|---|
|    |  | About Debtor 1:                          | About Debtor 2 (Spouse Only in a Joint Case): | Spouse Only in a Joint Case): |   |
| 1. | Your full name   |  |   |                               |   |
|    | Write the name that is on  | Stoycho                                  |   |                               |   |
|    | your government-issued picture identification (for example, your driver's  | First name                               | First name                                    |                               | - |
|    | license or passport).  | Middle name                              | Middle name                                   |                               | - |
|    | Bring your picture   | Ivanov                                   |   |                               |   |
|    | identification to your meeting with the trustee.   | Last name and Suffix (Sr., Jr., II, III) | Last name and Suffix (Sr., Jr., II, III)      | ffix (Sr., Jr., II, III)      | - |
| 2. | All other names you have used in the last 8 years  | •  |   |                               |   |
|    | Include your married or maiden names.  |  |   |                               |   |
| 3. | Only the last 4 digits of<br>your Social Security<br>number or federal<br>Individual Taxpayer<br>Identification number<br>(ITIN) | xxx-xx-3343                              |   |                               |   |
|    |  |  |   |                               |   |

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Case number (if known)

Debtor 1 Stoycho Ivanov

About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): Any business names and **Employer Identification** Numbers (EIN) you have ■ I have not used any business name or EINs. ☐ I have not used any business name or EINs. used in the last 8 years Business name(s) Include trade names and Business name(s) doing business as names EINs **EINs** Where you live If Debtor 2 lives at a different address: 3 Cour Masson, Unit 3 Palos Hills, IL 60465 Number, Street, City, State & ZIP Code Number, Street, City, State & ZIP Code Cook County County If Debtor 2's mailing address is different from yours, fill it If your mailing address is different from the one above, fill it in here. Note that the court will send any in here. Note that the court will send any notices to this notices to you at this mailing address. mailing address. Number, P.O. Box, Street, City, State & ZIP Code Number, P.O. Box, Street, City, State & ZIP Code Why you are choosing Check one: Check one: this district to file for bankruptcy Over the last 180 days before filing this Over the last 180 days before filing this petition, I have lived in this district longer than in any other petition, I have lived in this district longer than in any other district. district. I have another reason. I have another reason. Explain. (See 28 U.S.C. § 1408.) Explain. (See 28 U.S.C. § 1408.)

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Case number (if known) Debtor 1 Stoycho Ivanov

|    | The chapter of the Bankruptcy Code you are  |               |                                |  | f each, see <i>Notice Required by</i> 1<br>page 1 and check the appropriate | 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy box.   |
|----|---|---------------|--------------------------------|--|---|---|
|    | choosing to file under  | ■ Cha         | pter 7                         |  |   |   |
|    |   | ☐ Cha         | pter 11                        |  |   |   |
|    |   | ☐ Cha         | pter 12                        |  |   |   |
|    |   | ☐ Cha         | pter 13                        |  |   |   |
|    |   |               |                                |  |   |   |
| •  | How you will pay the fee  | al<br>o       | bout how y                     | ou may pay. Typic<br>r attorney is submi | ally, if you are paying the fee you   | with the clerk's office in your local court for more detainurself, you may pay with cash, cashier's check, or mone lf, your attorney may pay with a credit card or check with |
|    |   |               |                                |  | <b>Ilments.</b> If you choose this option (Official Form 103A).             | n, sign and attach the Application for Individuals to Pay   |
|    |   |               | request th                     | at my fee be waiv                        | ved (You may request this option  | only if you are filing for Chapter 7. By law, a judge may   |
|    |   |               |                                |  |   | ur income is less than 150% of the official poverty line<br>be in installments). If you choose this option, you must t  |
|    |   |               |                                |  |   | Official Form 103B) and file it with your petition.   |
|    |   |               |                                |  |   |   |
|    | Have you filed for bankruptcy within the last 8 years?                                | ■ No.         |                                |  |   |   |
|    | acto youro.   | <b>—</b> 100. | District                       |  | When  | Case number   |
|    |   |               | District                       |  | When  | Case number   |
|    |   |               | District                       |  | When  | Case number   |
| _  |   |               |                                |  |   |   |
| ). | Are any bankruptcy cases pending or being   | ■ No          |                                |  |   |   |
|    | filed by a spouse who is  | ☐ Yes.        |                                |  |   |   |
|    | not filing this case with<br>you, or by a business<br>partner, or by an<br>affiliate? |               |                                |  |   |   |
|    | you, or by a business partner, or by an   |               | Debtor                         |  |   | Relationship to you   |
|    | you, or by a business partner, or by an   |               | Debtor<br>District             |  | When  | Relationship to you  Case number, if known  |
|    | you, or by a business partner, or by an   |               |                                | -  | When  | <del></del>   |
|    | you, or by a business partner, or by an   |               | District                       |  | When When   | Case number, if known   |
| 1. | you, or by a business partner, or by an affiliate?  Do you rent your                  | ■ No.         | District<br>Debtor<br>District |  |   | Case number, if known  Relationship to you  |
| 1. | you, or by a business<br>partner, or by an<br>affiliate?                              |               | District Debtor District Go to | line 12.                                 | When  | Case number, if known  Relationship to you  |
| 1. | you, or by a business partner, or by an affiliate?  Do you rent your                  | ■ No.         | District Debtor District Go to | line 12.                                 | Whenned an eviction judgment against  | Case number, if known Relationship to you Case number, if known   |

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Desc Main Document Page 4 of 49 Case number (if known) Debtor 1 Stoycho Ivanov Report About Any Businesses You Own as a Sole Proprietor Are you a sole proprietor No. of any full- or part-time Go to Part 4. business? Name and location of business ☐ Yes. A sole proprietorship is a business you operate as Name of business, if any an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of Bankruptcy Code and are operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure you a small business in 11 U.S.C. 1116(1)(B). debtor? I am not filing under Chapter 11. No. For a definition of small business debtor, see 11 I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy ☐ No. U.S.C. § 101(51D). I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. ☐ Yes.

#### Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention

14. Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?

> For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?

■ No.

Yes.

What is the hazard?

If immediate attention is needed, why is it needed?

Where is the property?

Number, Street, City, State & Zip Code

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Debtor 1 Stoycho Ivanov Document Pa

Part 5:

About

#### Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### About Debtor 1:

You must check one:

Explain Your Efforts to Receive a Briefing About Credit Counseling

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity. I have a mental illness or a mental deficiency that makes

me incapable of realizing or making rational decisions

about finances.

□ Disability. My physical disability causes

me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military

combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

#### About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

Case number (if known)

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a | briefing about credit |
|--------------------------------|-----------------------|
| counseling because of:         |                       |

I have a mental illness or a mental deficiency that makes me incapable

of realizing or making rational decisions about finances.

☐ **Disability.** My physical disability causes me to

be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried

to do so.

☐ Active duty. I am currently on active military duty

in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court. Case 16-07374 Doc 1 Filed 03/03/16 Entered 03/03/16 11:17:35 Desc Main Document Page 6 of 49

Case number (if known) Stoycho Ivanov Debtor 1 **Answer These Questions for Reporting Purposes** Part 6: 16. What kind of debts do 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." you have? ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ☐ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. ☐ No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative Yes. after any exempt expenses are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses ■ No are paid that funds will be available for ☐ Yes distribution to unsecured creditors? 18. How many Creditors do 1-49 **1**,000-5,000 **1** 25,001-50,000 you estimate that you **5001-10,000 5**0,001-100,000 **50-99** owe? **1**0,001-25,000 ☐ More than 100,000 **1**00-199 **200-999** How much do you □ \$0 - \$50,000 □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your assets to **\$50,001 - \$100,000** □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion be worth? □ \$50,000,001 - \$100 million □ \$10.000.000.001 - \$50 billion □ \$100,001 - \$500,000 □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million 20. How much do you □ \$0 - \$50.000 □ \$1,000,001 - \$10 million □ \$500.000.001 - \$1 billion estimate your liabilities □ \$1,000,000,001 - \$10 billion **\$50,001 - \$100,000** □ \$10,000,001 - \$50 million to be? **\$100,001 - \$500,000** □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million Part 7: Sign Below For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Stoycho Ivanov Signature of Debtor 2 Stoycho Ivanov Signature of Debtor 1 Executed on March 2, 2016 Executed on MM / DD / YYYY MM / DD / YYYY

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Debtor 1 Stoycho Ivanov Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

| /s/ David F       | reydin                   | Date          | March 2, 2016                |
|-------------------|--------------------------|---------------|------------------------------|
| Signature of      | Attorney for Debtor      |               | MM / DD / YYYY               |
| David Frey        | din                      |               |                              |
| Printed name      |                          |               |                              |
| <b>Law Office</b> | s of David Freydin, Ltd. |               |                              |
| Firm name         | •                        |               |                              |
| 8707 Skoki        | ie Blvd                  |               |                              |
| Suite 305         |                          |               |                              |
| Skokie, IL        | 60077                    |               |                              |
|                   | City, State & ZIP Code   |               |                              |
| Contact phone     | 847-630-3122             | Email address | david.freydin@freydinlaw.com |
| 6286192           |                          |               |                              |
| Bar number & Sta  | ate                      |               | <del></del>                  |

|                        |                         | Docume            | nt Page 8 of 49 | ) |                                      |
|------------------------|-------------------------|-------------------|-----------------|---|--------------------------------------|
| Fill in this inform    | mation to identify your | case:             |                 |   |                                      |
| Debtor 1               | Stoycho Ivanov          |                   |                 |   |                                      |
|                        | First Name              | Middle Name       | Last Name       | _ |                                      |
| Debtor 2               |                         |                   |                 |   |                                      |
| (Spouse if, filing)    | First Name              | Middle Name       | Last Name       |   |                                      |
| United States Ba       | nkruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS     |   |                                      |
| Case number (if known) |                         |                   |                 |   | ☐ Check if this is an amended filing |
|                        |                         |                   |                 |   | amended ming                         |
|                        |                         |                   |                 |   |                                      |

### Official Form 106Sum

### **Summary of Your Assets and Liabilities and Certain Statistical Information**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

| hedule A/B: Property (Official Form 106A/B) Copy line 55, Total real estate, from Schedule A/B   | \$ \$  Your lia Amount \$ \$                        | 93,260.00  abilities t you owe  181,133.00          |
|--|---|---|
| Copy line 63, Total of all property on Schedule A/B  | Your lia  | abilities<br>t you owe<br>181,133.00                |
| Summarize Your Liabilities  The dule D: Creditors Who Have Claims Secured by Property (Official Form 106D) Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D  The dule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | Your lia Amount                                     | abilities<br>t you owe<br>181,133.00                |
| hedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D Thedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F                                 | \$\$  | 181,133.00  |
| Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D  hedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)  Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F   | \$\$  | 181,133.00  |
| Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D  hedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)  Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F   | \$  |   |
| Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F   |   | 0.00  |
| Conv. the total claims from Part 2 (nonpriority unsecured claims) from line 6i of Schedule F/F   | •   |   |
| copy the total dialine from Fair 2 (horipholity and course dialine) from the cycle conducto 27   | \$  | 21,332.00   |
| Your total liabilities   | \$  | 202,465.00  |
| Summarize Your Income and Expenses   |   |   |
| hedule I: Your Income (Official Form 106I) by your combined monthly income from line 12 of Schedule I  | \$  | 2,100.00  |
| hedule J: Your Expenses (Official Form 106J) by your monthly expenses from line 22c of Schedule J  | \$  | 3,145.87  |
| Answer These Questions for Administrative and Statistical Records  |   |   |
| e you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you   | our other so  | chedules.   |
| • • •  |   |   |
| 9  | y your monthly expenses from line 22c of Schedule J | y your monthly expenses from line 22c of Schedule J |

- Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

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From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 2,750.00 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

| From Part 4 on Schedule E/F, copy the following:   | Total o | claim |
|--|---------|-------|
| 9a. Domestic support obligations (Copy line 6a.)   | \$      | 0.00  |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.)  | \$      | 0.00  |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)  | \$      | 0.00  |
| 9d. Student loans. (Copy line 6f.)   | \$      | 0.00  |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$      | 0.00  |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)                                       | +\$     | 0.00  |
| 9g. <b>Total.</b> Add lines 9a through 9f.   | \$      | 0.00  |

|                  | Case                    | 16-07374        | Doc 1                 |            | 03/03/16<br>ument | Entered 03/03/1<br>Page 10 of 49                                | .6 11:17:35           | Des        | c Main                          |       |
|------------------|-------------------------|-----------------|-----------------------|------------|-------------------|---|-----------------------|------------|---------------------------------|-------|
| Fill in          | this information        | on to identify  | your case and t       |            |                   | 1 800. 10 01 43   |                       |            |                                 |       |
| Debto            |                         | toycho Ivar     |                       |            |                   |   |                       |            |                                 |       |
| Debio            |                         | rst Name        |                       | e Name     |                   | Last Name   |                       |            |                                 |       |
| Debto<br>(Spouse |                         | rst Name        | Middle                | e Name     |                   | Last Name   |                       |            |                                 |       |
| United           | d States Bankru         | otcy Court for  | the: NORTHER          | N DISTI    | RICT OF ILLIN     | NOIS  |                       |            |                                 |       |
|                  |                         | ,,              |                       |            |                   |   |                       |            |                                 |       |
| Case             | number                  |                 |                       |            |                   | _   |                       | [          | Check if this is amended filing |       |
|                  |                         |                 |                       |            |                   |   |                       |            | amended ming                    |       |
|                  |                         |                 |                       |            |                   |   |                       |            |                                 |       |
| Offic            | cial Form               | 106A/B          | }                     |            |                   |   |                       |            |                                 |       |
| Sch              | nedule A                | ∆/R· Pr         | onerty                |            |                   |   |                       |            | 12/1                            | 5     |
|                  |                         |                 |                       |            |                   |   | -4                    | -4 ! 4     |                                 | _     |
| fits be          | est. Be as comple       | ete and accura  | te as possible. If tw | o marrie   | d people are fil  | asset fits in more than one o<br>ing together, both are equally | responsible for su    | plying c   | orrect information. If          |       |
| nore sp          | pace is needed, a       | ttach a separat | e sheet to this forn  | n. On the  | top of any add    | itional pages, write your nam                                   | e and case number     | (if known  | ). Answer every que             | stior |
| Part 1:          | Describe Each           | Residence, Bu   | ilding, Land, or Oth  | ner Real I | Estate You Owr    | n or Have an Interest In  |                       |            |                                 |       |
| _                | _                       |                 |                       |            |                   |   |                       |            |                                 |       |
| . Do y           | ou own or have a        | ny legal or equ | itable interest in ar | ny reside  | nce, building, la | and, or similar property?                                       |                       |            |                                 |       |
| ПΝ               | o. Go to Part 2.        |                 |                       |            |                   |   |                       |            |                                 |       |
| Y                | es. Where is the        | oroperty?       |                       |            |                   |   |                       |            |                                 |       |
|                  |                         |                 |                       |            |                   |   |                       |            |                                 |       |
|                  |                         |                 |                       |            |                   |   |                       |            |                                 |       |
| 1.1              |                         |                 |                       | What       | is the property   | ? Check all that apply.   |                       |            |                                 |       |
|                  | Cour Masso              | n, Unit 3       |                       |            |                   |   | Do not deduct sec     | ured clain | ns or exemptions. Put           | the   |
|                  | street address, if avai | •               | cription              |            | Single-family h   |   | amount of any sec     | ured clair | ns on Schedule D:               |       |
|                  |                         |                 |                       |            | Duplex or mult    | <del>-</del>  | Creditors Who Ha      | ve Claims  | Secured by Property             |       |
|                  |                         |                 |                       |            | Condominium       | or cooperative  |                       |            |                                 |       |
| _                |                         |                 |                       |            | Manufactured      | or mobile home  | Current value of t    | he         | Current value of the            |       |
| _ F              | Palos Hills             | <u>IL</u>       | 60465-0000            |            | Land              |   | entire property?      |            | portion you own?                |       |
| С                | City                    | State           | ZIP Code              |            | Investment pro    | pperty  | \$85,000              | 0.00       | \$85,000                        | 00    |
|                  |                         |                 |                       |            | Timeshare         | wnhausa   |                       |            |                                 |       |
|                  |                         |                 |                       | -          |                   | wnhouse   |                       |            | ır ownership interest           |       |
|                  |                         |                 |                       | Who I one. | nas an interest   | in the property? Check  | a life estate), if kr |            | cy by the entireties,           | Эľ    |
|                  |                         |                 |                       | ono:<br>■  | Debtor 1 only     |   | Fee simple            |            |                                 |       |
| C                | Cook                    |                 |                       |            | Debtor 2 only     |   |                       |            |                                 |       |
| C                | County                  |                 |                       |            | Debtor 1 and [    | Debtor 2 only   | Observate if their    |            |                                 |       |
|                  |                         |                 |                       |            |                   | the debtors and another   | (see instructi        |            | unity property                  |       |
|                  |                         |                 |                       | Other      |                   | ou wish to add about this item                                  | , such as local       | •          |                                 |       |
|                  |                         |                 |                       |            | rty identificati  |   |                       |            |                                 |       |
|                  |                         |                 |                       | Purc       | hased in 20       | 009 for \$190,000   |                       |            |                                 |       |
|                  |                         |                 |                       |            |                   | · · · · · · · · · · · · · · · · · · ·                           |                       |            |                                 |       |
|                  |                         |                 |                       |            |                   |   |                       |            |                                 |       |

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for

pages you have attached for Part 1. Write that number here......

Official Form 106A/B Schedule A/B: Property page 1

Part 2: Describe Your Vehicles

\$85,000.00

| Deb           | or 1 <b>S</b>             | toycho Ivanov                                      |   | Document  | Page 11 of 49 <sub>Ca</sub> | se number (if known)     |  |
|---------------|---------------------------|--|---|---|-----------------------------|--------------------------|--|
| 3. <b>C</b> a | ars, vans,                | trucks, tractors,                                  | sport utility ve                                | hicles, motorcycles                                 |                             |                          |  |
|               | No                        |  |   |   |                             |                          |  |
|               | Yes                       |  |   |   |                             |                          |  |
|               |                           |  |   |   |                             |                          |  |
| 3.1           | Make:                     | Freightliner                                       |   | Who has an interest in the                          | property? Check one.        |                          | I claims or exemptions. Put ured claims on Schedule D:     |
|               | Model:                    | Century  |   | Debtor 1 only                                       |                             |                          | Claims Secured by Property.                                |
|               | Year:                     | 2005   |   | Debtor 2 only                                       |                             | Current value of the     | Current value of the                                       |
|               |                           | nate mileage:                                      | 1,200,000                                       | Debtor 1 and Debtor 2 o                             |                             | entire property?         | portion you own?   |
|               |                           | formation:<br>es repairs and a                     | dditional                                       | At least one of the debto                           | ors and another             |                          |  |
|               |                           | enance   | duitional                                       | Check if this is commu (see instructions)           | inity property              | \$6,000.00               | \$6,000.00   |
| 5 A           | ages you<br>              |  | r Part 2. Write t                               | n for all of your entries fi<br>that number here    |                             |                          | \$6,000.00   |
|               |                           |  |   | erest in any of the follow                          | vina items?                 |                          | Current value of the                                       |
| E             | xamples:<br>No            | goods and furnis<br>Major appliances, f<br>escribe |   | china, kitchenware                                  |                             |                          | Do not deduct secured claims or exemptions.                |
| E             | l No                      | Televisions and rad                                | es, cameras, m                                  | eo, stereo, and digital equi<br>edia players, games |                             | rs, scanners; music coll | ections; electronic devices \$100.00                       |
| 9. <b>E</b> @ | xamples:<br>No<br>Yes. De | other collections, nescribe for sports and ho      | nemorabilia, col<br>obbies<br>nic, exercise, an |   |                             |                          | r baseball card collections;<br>d kayaks; carpentry tools; |
| 10. <b>F</b>  | Yes. De irearms Examples  | escribe  :: Pistols, rifles, sho                   | otguns, ammunid                                 | tion, and related equipmer                          | nt                          |                          |  |

Official Form 106A/B

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Official Form 106A/B

% of ownership:

■ Yes. Give specific information about them.....

Name of entity:

Case 16-07374 Doc 1 Filed 03/03/16 Entered 03/03/16 11:17:35 Desc Main Document Page 13 of 49 Case number (if known) Debtor 1 Stoycho Ivanov SDI Trucking, Inc. 100 % \$0.00 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans ☐ Yes. List each account separately. Type of account: Institution name: 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others No Institution name or individual: ☐ Yes. ..... 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No Issuer name and description. ☐ Yes..... 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit No ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ■ No ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses ☐ Yes. Give specific information about them... Money or property owed to you? Current value of the portion you own?

## Do not deduct secured claims or exemptions.

### 28. Tax refunds owed to you

□ No

Yes. Give specific information about them, including whether you already filed the returns and the tax years......

Tax Refund for 2015 \$1,000.00 **Federal** 

### 29. Family support

Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement

☐ Yes. Give specific information.....

Entered 03/03/16 11:17:35 Case 16-07374 Doc 1 Filed 03/03/16 Desc Main Document Page 14 of 49 Case number (if known) Debtor 1 Stoycho Ivanov 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else ■ No ☐ Yes. Give specific information.. 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance ☐ Yes. Name the insurance company of each policy and list its value. Company name: Beneficiary: Surrender or refund value: 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. ■ No ☐ Yes. Give specific information... 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue ■ No ☐ Yes. Describe each claim....... 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims ■ No ☐ Yes. Describe each claim....... 35. Any financial assets you did not already list ■ No ☐ Yes. Give specific information.. 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached \$1.355.00 for Part 4. Write that number here...... Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. ☐ Yes. Go to line 38. Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. Yes. Go to line 47. Current value of the portion you own? Do not deduct secured claims or exemptions. Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here ...... \$0.00

Schedule A/B: Property

Official Form 106A/B

page 5

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Case number (if known)

Document Debtor 1 Stoycho Ivanov

| 55. | Part 1: Total real estate, line 2                            |            |                              | \$85,000.00 |
|-----|--|------------|------------------------------|-------------|
| 56. | Part 2: Total vehicles, line 5                               | \$6,000.00 |                              |             |
| 57. | Part 3: Total personal and household items, line 15          | \$905.00   |                              |             |
| 58. | Part 4: Total financial assets, line 36                      | \$1,355.00 |                              |             |
| 59. | Part 5: Total business-related property, line 45             | \$0.00     |                              |             |
| 60. | Part 6: Total farm- and fishing-related property, line 52    | \$0.00     |                              |             |
| 61. | Part 7: Total other property not listed, line 54 +           | \$0.00     |                              |             |
| 62. | Total personal property. Add lines 56 through 61             | \$8,260.00 | Copy personal property total | \$8,260.00  |
| 63. | Total of all property on Schedule A/B. Add line 55 + line 62 |            |                              | \$93,260.00 |

Official Form 106A/B

| Fill in this info                       | rmation to identify your | case:             |             |  |
|---|--------------------------|-------------------|-------------|--|
| Debtor 1                                | Stoycho Ivanov           |                   |             |  |
|   | First Name               | Middle Name       | Last Name   |  |
| Debtor 2                                |                          |                   |             |  |
| (Spouse if, filing)                     | First Name               | Middle Name       | Last Name   |  |
| United States Bankruptcy Court for the: |                          | NORTHERN DISTRICT | OF ILLINOIS |  |
| Case number                             |                          |                   |             |  |
| (if known)                              |                          |                   |             |  |
|   |                          |                   |             |  |

### Official Form 106C

### Schedule C: The Property You Claim as Exempt

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

| Part 1: Identify the Property You Claim as Exen |
|---|
|---|

| <ol> <li>Which set of exemptions are you claiming? Check one only, even if your spouse is filing</li> </ol> |
|---|
|---|

- You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

|    | Brief description of the property and line on<br>Schedule A/B that lists this property | Current value of the portion you own | Amo | ount of the exemption you claim                                 | Specific laws that allow exemption |
|----|--|--------------------------------------|-----|---|------------------------------------|
|    |  | Copy the value from<br>Schedule A/B  | Che | eck only one box for each exemption.                            |                                    |
|    | 2005 Freightliner Century 1,200,000 miles  | \$6,000.00                           |     | \$2,400.00  | 735 ILCS 5/12-1001(c)              |
| re | requires repairs and additional maintenance Line from Schedule A/B: 3.1                |                                      |     | 100% of fair market value, up to any applicable statutory limit |                                    |
|    | 2005 Freightliner Century 1,200,000 miles  | \$6,000.00                           |     | \$1,500.00  | 735 ILCS 5/12-1001(d)              |
|    | requires repairs and additional maintenance Line from Schedule A/B: 3.1                |                                      |     | 100% of fair market value, up to any applicable statutory limit |                                    |
|    | 2005 Freightliner Century 1,200,000 miles  | \$6,000.00                           |     | \$2,100.00  | 735 ILCS 5/12-1001(b)              |
|    | requires repairs and additional maintenance Line from Schedule A/B: 3.1                |                                      |     | 100% of fair market value, up to any applicable statutory limit |                                    |
|    | -<br>Line from <i>Schedule A/B</i> : <b>11.1</b>                                       | \$100.00                             |     | \$100.00  | 735 ILCS 5/12-1001(a)              |
|    | Line from Generale PVD. 1111   |                                      |     | 100% of fair market value, up to any applicable statutory limit |                                    |

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Case number (if known)

| Brief description of the property and line on<br>Schedule A/B that lists this property |  | Current value of the portion you own | Am      | ount of the exemption you claim                                 | Specific laws that allow exemption |
|--|--|--------------------------------------|---------|---|------------------------------------|
|  |  | Copy the value from<br>Schedule A/B  | Che     | eck only one box for each exemption.                            |                                    |
|  | Line from Schedule A/B: 12.1   | \$105.00                             |         | \$105.00  | 735 ILCS 5/12-1001(b)              |
|  |  |                                      |         | 100% of fair market value, up to any applicable statutory limit |                                    |
|  | Cash Line from Schedule A/B: 16.1  | \$300.00                             |         | \$300.00  | 735 ILCS 5/12-1001(b)              |
| Line Holli Schedule Arb. 10.1  |  |                                      |         | 100% of fair market value, up to any applicable statutory limit |                                    |
|  | Checking: TCF Bank Line from Schedule A/B: 17.1                                    | \$30.00                              |         | \$30.00   | 735 ILCS 5/12-1001(b)              |
|  | Line Ironi Scredule A/B. 17.1  |                                      |         | 100% of fair market value, up to any applicable statutory limit |                                    |
|  | Checking: TCF Bank (account held with spouse)                                      | \$50.00                              |         | \$25.00   | 735 ILCS 5/12-1001(b)              |
|  | Line from Schedule A/B: 17.2   |                                      |         | 100% of fair market value, up to any applicable statutory limit |                                    |
|  | Federal: Tax Refund for 2015 Line from Schedule A/B: 28.1                          | \$1,000.00                           |         | \$1,000.00  | 735 ILCS 5/12-1001(b)              |
|  | Line Holli Galledale A.D. 20.1   |                                      |         | 100% of fair market value, up to any applicable statutory limit |                                    |
| 3.   | Are you claiming a homestead exemption (Subject to adjustment on 4/01/16 and every |                                      |         | filed on or after the date of adjustme                          | ent.)                              |
|  | ■ No   | ,                                    |         | •   | ,                                  |
|  | ☐ Yes. Did you acquire the property cover  | ed by the exemption w                | ithin 1 | ,215 days before you filed this case                            | e?                                 |
|  | □ No   |                                      |         | ,   | -                                  |
|  | ☐ Ves  |                                      |         |   |                                    |

|   |  | Document  | Page 18         | of 49  |  |                             |
|---|--|---|-----------------|--|--|-----------------------------|
| Fill in this informatio   | on to identify you                           | r case:   |                 |  |  |                             |
|   | toycho Ivanov                                | Middle Name   | Last Name       |  |  |                             |
| Debtor 2  | ist Name                                     | Middle Name   | Last Name       |  |  |                             |
|   | rst Name                                     | Middle Name   | Last Name       |  |  |                             |
| United States Bankrup   | otcy Court for the:                          | NORTHERN DISTRICT OF ILLII  | NOIS            |  |  |                             |
| Case number   |  |   |                 |  |  | if this is an<br>ded filing |
| Official Form 10  | 06D  |   |                 |  |  |                             |
|   |  | Who Have Claims S   | Secured         | by Property  | v  | 12/15                       |
| Be as complete and accu   | ırate as possible. If                        | two married people are filing together,<br>number the entries, and attach it to this  | both are equall | ly responsible for supp                                | olying correct informatio                          |                             |
| 1. Do any creditors have  | claims secured by y                          | our property?   |                 |  |  |                             |
| ☐ No. Check this  | box and submit th                            | is form to the court with your other s  | schedules. Yo   | u have nothing else                                    | to report on this form.                            |                             |
| ■ Ves Fill in all o   | of the information b                         | pelow   |                 | · ·  | ·  |                             |
|   |  | ociow.  |                 |  |  |                             |
| •   | cured Claims                                 |   |                 | Column A   | Column B   | Column C                    |
| each claim. If more than  | one creditor has a pa                        | ore than one secured claim, list the creditor<br>rticular claim, list the other creditors in Pa<br>r according to the creditor's name.  |                 | Amount of claim Do not deduct the value of collateral. | Value of collateral<br>that supports this<br>claim | Unsecured portion           |
| 2.1 Chase Home I  | Finance                                      | Describe the property that secures the  | e claim:        | \$37,356.00  | \$85,000.00  | \$37,356.00                 |
| PO BOX 78420 Phoenix, AZ 8 Number, Street, City, 9  Who owes the debt? O  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 At least one of the debt Check if this claim recommunity debt | 0<br>85062<br>State & Zip Code<br>Check one. | 3 Cour Masson, Unit 3 Palos IL 60465 Cook County Purchased in 2009 for \$190,0 As of the date you file, the claim is: Chapply.  Contingent Unliquidated Disputed Nature of lien. Check all that apply.  An agreement you made (such as mo car loan)  Statutory lien (such as tax lien, mechal) Judgment lien from a lawsuit Other (including a right to offset) | neck all that   | ed   |  |                             |
| Date debt was incurred  |  | Last 4 digits of account number   | er 6753         |  |  |                             |
| 2.2 Seterus   |  | Describe the property that secures the  | e claim:        | \$143,777.00   | \$85,000.00  | \$58,777.00                 |
| 14523 SW Mill<br>Suite 200<br>Beaverton, OF   | likan Way                                    | 3 Cour Masson, Unit 3 Palos IL 60465 Cook County Purchased in 2009 for \$190,0 As of the date you file, the claim is: Chapply.  ☐ Contingent ☐ Unliquidated   | 000             |  |  |                             |
| Who owes the debt?  | Shock one                                    | ☐ Disputed  Nature of lien. Check all that apply.   |                 |  |  |                             |
| Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 At least one of the deb   | 2 only<br>otors and another                  | □ An agreement you made (such as mo car loan) □ Statutory lien (such as tax lien, mechanism Judgment lien from a lawsuit □ Other (including a right to offset)  |                 | ed   |  |                             |
| community debt  |  | — Saler (moraumy a right to onset)  |                 |  |  |                             |
| Date debt was incurred  |  | Last 4 digits of account numbe  | er 6816         |  |  |                             |

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| Debtor 1 Stoycho Ivanov   |                     |   |  | Case number (if know)  |                                  |
|---------------------------|---------------------|---|--|--|----------------------------------|
|                           | First Name          | Middle Name   | Last Name  | _  |                                  |
| If this is                | •                   | r entries in Column A on th<br>ur form, add the dollar val  | nis page. Write that number here:<br>ue totals from all pages. | \$181,133.00<br>\$181,133.00   |                                  |
| Part 2:                   | List Others to B    | e Notified for a Debt Th                                    | at You Already Listed  |  |                                  |
| to collect<br>creditor fo | from you for a debt | t you owe to someone else<br>that you listed in Part 1, lis | , list the creditor in Part 1, and ther                        | you already listed in Part 1. For exam<br>n list the collection agency here. Simil<br>ou do not have additional persons to b | larly, if you have more than one |
| Na                        | me Address          |   |  |  |                                  |
| -N                        | ONE-                |   | On which   | n line in Part 1 did you enter   | the creditor?                    |
|                           |                     |   | Last 4 di  | gits of account number   |                                  |

| 4.2                            | Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a commundebt Is the claim subject to offset?  No Yes  Chase Card Services Nonpriority Creditor's Name | Student loans  Obligations arising out not report as priority claim   | t of a separ<br>ns<br>rofit-sharing<br>Credit | claim: ation agreement or divorce that you did                                      |                | \$                        | 0.00                                |
|--------------------------------|--|---|---|---|----------------|---------------------------|-------------------------------------|
|                                | ■ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a commun debt Is the claim subject to offset? ■ No   | Unliquidated  Disputed Type of NONPRIORITY usity Student loans  Obligations arising out not report as priority claim Debts to pension or price. | t of a separ<br>ns<br>rofit-sharinດຸ          | claim: ation agreement or divorce that you did                                      |                |                           |                                     |
|                                | ■ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a commun debt Is the claim subject to offset? ■ No   | Unliquidated  Disputed Type of NONPRIORITY usity Student loans  Obligations arising out not report as priority claim Debts to pension or price. | t of a separ<br>ns<br>rofit-sharinດຸ          | claim: ation agreement or divorce that you did                                      |                |                           |                                     |
|                                | ■ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a communication.   | Unliquidated  Disputed  Type of NONPRIORITY L  Student loans  Obligations arising out not report as priority claim                              | t of a separ                                  | claim: ation agreement or divorce that you did                                      |                |                           |                                     |
|                                | ■ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a communication.   | ☐ Unliquidated ☐ Disputed ☐ Type of NONPRIORITY unity ☐ Student loans   |   | claim:  |                |                           |                                     |
|                                | ■ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another   | ☐ Unliquidated ☐ Disputed Type of NONPRIORITY U   | unsecured                                     |   |                |                           |                                     |
|                                | ■ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only   | ☐ Unliquidated ☐ Disputed   |   |   |                |                           |                                     |
|                                | ■ Debtor 1 only □ Debtor 2 only  | ☐ Unliquidated  |   | ,   |                |                           |                                     |
|                                | Debtor 1 only  | _   |   | ,   |                |                           |                                     |
|                                | _  | ☐ Contingent  |   | ,   |                |                           |                                     |
|                                |  | _   |   | ,   |                |                           |                                     |
|                                | Number Street City State Zlp Code  | As of the date you file, the  | he claim is                                   | :: Check all that apply   |                |                           |                                     |
|                                | Po Box 26012<br>Greensboro, NC 27410   | When was the debt incu  |   | Opened 6/01/11 Last<br>Active 1/19/16   |                |                           |                                     |
| 4.1                            | Nonpriority Creditor's Name Nc4-105-03-14  | Last 4 digits of account  | number  | 9939<br>Opened 6/01/11 Last   |                | \$                        | 7,565.00                            |
| 44                             |  |   |   |   |                | Total cl                  |                                     |
|                                | List all of your nonpriority unsecured cla<br>unsecured claim, list the creditor separately<br>than one creditor holds a particular claim, lis<br>Part 2.  | for each claim. For each claim listed   | l, identify w                                 | hat type of claim it is. Do not list claims a                                       | lread          | y included in             | Part 1. If more                     |
|                                | Yes.   | 222 and form to the court with  | ,   |   |                |                           |                                     |
| J.                             | ☐ No. You have nothing to report in this pa  |   | VOUT Other                                    | schedules   |                |                           |                                     |
| Part 2                         | List All of Your NONPRIORITY U  Do any creditors have nonpriority unsecu   |   |   |   |                |                           |                                     |
| Dow -                          | Yes.   | Inaccured Claires   |   |   |                |                           |                                     |
|                                | No. Go to Part 2.  |   |   |   |                |                           |                                     |
| 1.                             | Do any creditors have priority unsecured   | claims against you?   |   |   |                |                           |                                     |
| Part 1                         | List All of Your PRIORITY Unse   | cured Claims  |   |   |                |                           |                                     |
| Schedul<br>D: Credi<br>the Con | le G: Executory Contracts and Unexpired itors Who Have Claims Secured by Prope tinuation Page to this page. If you have no (if known).   | Leases (Official Form 106G). Do n rty. If more space is needed, copy  | ot include<br>the Part y                      | any creditors with partially secured cl<br>ou need, fill it out, number the entries | aims<br>in the | that are lise<br>boxes on | ted in Schedule<br>the left. Attach |
| Be as co                       | omplete and accurate as possible. Use Pa   | rt 1 for creditors with PRIORITY cl   | laims and                                     | Part 2 for creditors with NONPRIORITY   |                |                           | other party to                      |
|                                | <u>cial Form 106E/F</u><br>edule E/F: Creditors W  | ho Have Unsecure  | ed Cla  | ims   |                |                           | 12/15                               |
|                                | ,<br>  |   |   |   |                | amended                   |                                     |
| Case r                         | number   |   |   |   | П              | Check if t                | his is an                           |
| United                         | States Bankruptcy Court for the: N   | ORTHERN DISTRICT OF ILLIN   | NOIS  |   |                |                           |                                     |
|                                | First Name   | Middle Name   | Last Name                                     |   |                |                           |                                     |
| (Spouse                        | First Name   | Middle Name   | Last Name                                     |   |                |                           |                                     |
| Debtoi<br>(Spouse              | 213,0110 1141101   |   |   |   |                |                           |                                     |
|                                |  |   |   |   |                |                           |                                     |
| Debtoi<br>Debtoi               | this information to identify your case   | se:   |   |   |                |                           |                                     |

Official Form 106 E/F

As of the date you file, the claim is: Check all that apply

Wilmington, DE 19850 Number Street City State Zlp Code

| Debtor | Case 16-07374 Doc 1 Filed 03/03/16 Entered 03/03/16 11:17:3  Document Page 21 of 49  Case number (if know) |  |          |  | Desc Main |          |  |  |
|--------|--|--|----------|--|-----------|----------|--|--|
|        | Who incurred the debt? Check one.  Debtor 1 only   | Contingent   |          | · · · · · · · · · · · · · · · · · · ·    |           |          |  |  |
|        | Debtor 2 only  | ☐ Unliquidated   |          |  |           |          |  |  |
|        | ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another                                     | ☐ Disputed  Type of NONPRIORITY uns                        | ecured   | claim:                                   |           |          |  |  |
|        | ☐ Check if this claim is for a community   | ☐ Student loans  |          |  |           |          |  |  |
|        | debt Is the claim subject to offset?   | ☐ Obligations arising out of not report as priority claims | a sepai  | ration agreement or divorce that you did |           |          |  |  |
|        | ■ No   | _ ' ' '  | :-sharin | g plans, and other similar debts         |           |          |  |  |
|        | Yes  | Other. Specify   | Credit   | Card                                     |           |          |  |  |
| 4.3    | Chase Card Services  | Last 4 digits of account nur                               | mber     | 8048                                     | \$        | 0.00     |  |  |
|        | Nonpriority Creditor's Name Attn: Correspondence Dept Po Box 15298 Wilmington, DE 19850                    | When was the debt incurred?                                |          | Opened 10/01/06 Last<br>Active 8/27/08   |           |          |  |  |
|        | Number Street City State Zlp Code  | As of the date you file, the                               |          |  |           |          |  |  |
|        | Who incurred the debt? Check one.  Debtor 1 only   | Contingent   |          |  |           |          |  |  |
|        | Debtor 2 only  | ☐ Unliquidated   |          |  |           |          |  |  |
|        | ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another                                     | ☐ Disputed  Type of NONPRIORITY unsecured claim:           |          |  |           |          |  |  |
|        | ☐ Check if this claim is for a community   | ☐ Student loans  |          |  |           |          |  |  |
|        | debt Is the claim subject to offset?   | ☐ Obligations arising out of not report as priority claims | a sepai  | ration agreement or divorce that you did |           |          |  |  |
|        | ■ No   |  | :-sharin | g plans, and other similar debts         |           |          |  |  |
|        | Yes  | Other. Specify   | Credit   | Card                                     |           |          |  |  |
| 1.4    | Chase Mtg  | Last 4 digits of account nur                               | mber     | 0516                                     | \$        | 0.00     |  |  |
|        | Nonpriority Creditor's Name  Po Box 24696  Columbus OH 42224   | When was the debt incurred                                 | d?       | Opened 7/10/07 Last<br>Active 6/05/10    |           |          |  |  |
|        | Columbus, OH 43224  Number Street City State Zlp Code  | As of the date you file, the                               | claim is | s: Check all that apply                  |           |          |  |  |
|        | Who incurred the debt? Check one.  Debtor 1 only   | ☐ Contingent   |          |  |           |          |  |  |
|        | Debtor 2 only  | ☐ Unliquidated   |          |  |           |          |  |  |
|        | ☐ Debtor 1 and Debtor 2 only   | □ Disputed   |          |  |           |          |  |  |
|        | ☐ At least one of the debtors and another  | Type of NONPRIORITY uns                                    | ecured   | claim:                                   |           |          |  |  |
|        | ☐ Check if this claim is for a community   | ☐ Student loans  |          |  |           |          |  |  |
|        | debt Is the claim subject to offset?   | Obligations arising out of not report as priority claims   | a sepai  | ration agreement or divorce that you did |           |          |  |  |
|        | No   | ☐ Debts to pension or profit-                              | -sharin  | g plans, and other similar debts         |           |          |  |  |
|        | Yes  | Other. Specify   | Real E   | state Mortgage                           |           |          |  |  |
| 4.5    | Citibank / Sears   | Last 4 digits of account nur                               | mber     | 5650                                     | \$        | 2,067.00 |  |  |

Nonpriority Creditor's Name

Case 16-07374 Doc 1 Entered 03/03/16 11:17:35 Desc Main Filed 03/03/16

|   | Number Street City State Zlp Code  | As of the date you file, the                                    | e claim is  | s: Check all that apply                |    |           |  |  |
|---|--|---|---|--|----|-----------|--|--|
|   | Attn:Bankruptcy 443 Jefferson Blvd Ms Rjw-135 Warwick, RI 02886                    | Opened 4/01/08 Last When was the debt incurred?  Active 1/05/16 |   |  |    |           |  |  |
| 4.7   | Citizens Bank Nonpriority Creditor's Name  | Last 4 digits of account n                                      | umber 4323  |  | \$ | 11,252.00 |  |  |
|   | Yes  | Other. Specify  | Charg   | e Account                              |    |           |  |  |
|   | No   | ☐ Debts to pension or pro                                       | g plans, and other similar debts  |  |    |           |  |  |
|   | Is the claim subject to offset?  | Obligations arising out on not report as priority claims        |   |  |    |           |  |  |
|   | ☐ Check if this claim is for a community debt                                      | ☐ Student loans   |   |  |    |           |  |  |
|   | At least one of the debtors and another  | Type of NONPRIORITY unsecured claim:                            |   |  |    |           |  |  |
|   | ☐ Debtor 1 and Debtor 2 only   | Disputed  |   |  |    |           |  |  |
|   | ☐ Debtor 2 only  | ☐ Unliquidated  |   |  |    |           |  |  |
|   | ■ Debtor 1 only  |   |   |  |    |           |  |  |
|   | Who incurred the debt? Check one.  | ☐ Contingent  |   |  |    |           |  |  |
|   | Number Street City State Zlp Code  | As of the date you file, the                                    | As of the date you file, the claim is: Check all that apply               |  |    |           |  |  |
|   | Centralized Bankruptcy/CitiCorp<br>Credit S<br>Po Box 790040<br>St Louis, MO 63179 | When was the debt incur   | red?  | Opened 11/18/05 Last<br>Active 5/14/08 |    |           |  |  |
| 4.6   | Citibank/Best Buy  Nonpriority Creditor's Name                                     | Last 4 digits of account n                                      | umber   | 3887                                   | \$ | 0.00      |  |  |
|   |  | Other. Specify  | • <u>9</u>  |  |    |           |  |  |
|   | ☐ Yes  |   | Charg   | e Account                              |    |           |  |  |
|   | ■ No   |   |   | g plans, and other similar debts       |    |           |  |  |
| ☐ Check if this claim is for a community debt Is the claim subject to offset? |  | ☐ Obligations arising out of not report as priority claims      | Obligations arising out of a separation agreement or divorce that you did |  |    |           |  |  |
|   |  | ☐ Student loans   |   |  |    |           |  |  |
|   | ☐ At least one of the debtors and another  | Type of NONPRIORITY ur  | nsecured  | claim:                                 |    |           |  |  |
|   | ☐ Debtor 1 and Debtor 2 only   | Disputed  |   |  |    |           |  |  |
|   | Debtor 2 only  | ☐ Unliquidated  |   |  |    |           |  |  |
|   | Who incurred the debt? Check one.  Debtor 1 only                                   | ☐ Contingent  |   |  |    |           |  |  |
|   | Number Street City State Zlp Code  | As of the date you file, the                                    | e claim is  | s: Check all that apply                |    |           |  |  |
|   | Po Box 790040<br>Saint Louis, MO 63179   |   |   |  |    |           |  |  |
|   | Citicard Credit Srvs/Centralized Bankrup   | When was the debt incur   | red?  | Opened 9/01/10 Last<br>Active 2/12/16  |    |           |  |  |
| Debto   | Stoycho Ivanov   |   | aye   | Case number (if know)                  |    |           |  |  |

Official Form 106 E/F

|  | Case :   | 16-07374              | Doc 1   | Filed 03/03/16<br>Document   | Enter<br>Page 2              | ed 03/023 of 49                        | 03/16 11:17:35  | Desc Ma                               | iin                |
|--|--|-----------------------|---|--|------------------------------|--|---|---------------------------------------|--------------------|
| Debtor 1                                 | Stoycho Iv   | vanov                 |   | 2004.1101.11   | . ago .                      | Case nu                                | )<br>Imber (if know)  |                                       |                    |
| _  | ho incurred th   | ne debt? Check on     | ie.   | ☐ Contingent   |                              |  |   |                                       |                    |
| Debtor 2 only                            |  |                       | ☐ Unliquidated                                      |  |                              |  |   |                                       |                    |
|  | Debtor 1 and   | Debtor 2 only         | anothor   | ☐ Disputed  Type of NONPRIORITY                                      | unsecured                    | claim:                                 |   |                                       |                    |
|  | _  | claim is for a co     |   | ☐ Student loans  |                              |  |   |                                       |                    |
|  | ebt  | ciaiii is ioi a co    | illillullity  | - Student loans  |                              |  |   |                                       |                    |
| Is the claim subject to offset?          |  |                       | Obligations arising ounot report as priority claim  |  | ation agreen                 | nent or divorce that you did           |   |                                       |                    |
| No                                       |  | Debts to pension or p | rofit-sharing                                       | plans, and   | other similar debts          |  |   |                                       |                    |
| Yes                                      |  |                       | Other. Specify                                      | Check  | Credit O                     | r Line Of Credit                       |   |                                       |                    |
| 4.8 <b>C</b> c                           | omenity Ba   | ank/Harlem F          | urniture  | Last 4 digits of account   | number                       | 8293                                   |   | \$                                    | 448.00             |
| No                                       | onpriority Credi   | itor's Name           |   |  |                              | _                                      |   |                                       |                    |
|  | o Box 1821<br>olumbus, (   |                       |   | When was the debt incu   | urred?                       | Opened 11/04/06 Last<br>Active 1/05/16 |   |                                       |                    |
| Nu                                       | umber Street C   | City State Zlp Code   |   | As of the date you file,   | the claim is                 | : Check all t                          | hat apply   |                                       |                    |
| WI                                       | ho incurred th   | ne debt? Check on     | ne.   | ☐ Contingent   |                              |  |   |                                       |                    |
|  | Debtor 1 only  | /                     |   | <b>—</b> contingent  |                              |  |   |                                       |                    |
|  | Debtor 2 only  | ,                     |   | □ Unliquidated   |                              |  |   |                                       |                    |
| _  |  |                       | ☐ Disputed  |  |                              |  |   |                                       |                    |
|  | ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another |                       |   | Type of NONPRIORITY  | unsecured                    | claim:                                 |   |                                       |                    |
| ☐ Check if this claim is for a community |  |                       | Student loans                                       |  |                              |  |   |                                       |                    |
| de                                       | ebt  |                       | uy  |  |                              |  |   |                                       |                    |
| Is the claim subject to offset?          |  |                       | Obligations arising ou not report as priority clain |  | ation agreen                 | nent or divorce that you did           |   |                                       |                    |
|  | No   |                       |   | Debts to pension or p  | rofit-sharing                | plans, and                             | other similar debts   |                                       |                    |
|  | Yes  |                       |   | Other. Specify   | Charge                       | Accoun                                 | t   |                                       |                    |
| Part 3:                                  | List Others  | to Be Notified        | About a Deb   | t That You Already Lis   | ted                          |  |   |                                       |                    |
| trying to o                              | collect from y<br>n one credito  | ou for a debt you     | owe to someo<br>bts that you lis<br>or submit this  | one else, list the original constend in Parts 1 or 2, list the page. | reditor in P<br>e additional | arts 1 or 2, t<br>creditors h          | listed in Parts 1 or 2. For e<br>then list the collection age<br>lere. If you do not have add | ency here. Simila<br>ditional persons | arly, if you have  |
| Name an -NONE-                           | d Address  |                       |   | On which entry in Par<br>Line of ( <i>Check one):</i>                |                              | Part 1: C                              | ulist the original credi<br>reditors with Priority Ureditors with Nonprior                    | Jnsecured Cl                          |                    |
|  |  |                       | L   | ast 4 digits of accou  |                              |  |   | .,                                    |                    |
| Part 4:                                  | Add the Am   | nounts for Each       | Type of Un  | secured Claim  |                              |  |   |                                       |                    |
|  |  |                       |   |  | statistical r                | eporting pu                            | rposes only. 28 U.S.C. §15  | i9. Add the amo                       | unts for each type |
|  | ured claim.  |                       |   |  |                              | -pg p                                  | . pecce cy. 20 c.c.c. 3.0   |                                       |                    |
|  | 6a.  | Domestic suppo        | rt obligations                                      |  |                              | 6a.                                    | Total claim   | 0.00                                  |                    |
| Total claim                              | ıs   | Domociio cappo        | rt obligationo                                      |  |                              | ou.                                    | Ψ   |                                       |                    |
| from Part                                | 1 6b.<br>6c.   |                       |   | you owe the government<br>njury while you were intox                 | icated                       | 6b.<br>6c.                             | \$<br>\$  | 0.00                                  |                    |
|  | 6d.  |                       | -   | cured claims. Write that am  |                              | 6d.                                    | \$  | 0.00                                  |                    |
|  |  |                       | . , , , , , ,                                       |  |                              |  | ·   |                                       |                    |
|  | 6e.  | Total. Add lines 6    | a through 6d.                                       |  |                              | 6e.                                    | \$  | 0.00                                  |                    |
|  |  |                       |   |  |                              |  | T. (10)   |                                       |                    |
|  | 6f.  | Student loans         |   |  |                              | 6f.                                    | Total Claim<br>\$   | 0.00                                  |                    |
| Total claim from Part                    |  | Obligations arisi     |   | paration agreement or div  | orce that yo                 | ou<br>6g.                              | \$  | 0.00                                  |                    |
|  |  |                       |   |  |                              |  |   |                                       |                    |

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Debtor 1 Stoycho Ivanov Document Page 24 of 49
Case number (if know)

6h. Debts to pension or profit-sharing plans, and other similar debts
6h. \$ 0.00
6i. Other. Add all other nonpriority unsecured claims. Write that amount here.
6i. \$ 21,332.00
6j. Total. Add lines 6f through 6i.
6j. \$ 21,332.00

|   |                          |                   | $\frac{1}{1}$ |                      |
|---|--------------------------|-------------------|---------------|----------------------|
| Fill in this infor                      | rmation to identify your | case:             |               |                      |
| Debtor 1                                | Stoycho Ivanov           |                   |               |                      |
|   | First Name               | Middle Name       | Last Name     |                      |
| Debtor 2                                |                          |                   |               |                      |
| (Spouse if, filing)                     | First Name               | Middle Name       | Last Name     |                      |
| United States Bankruptcy Court for the: |                          | NORTHERN DISTRICT | OF ILLINOIS   |                      |
| Case number                             |                          |                   |               | ☐ Check if this is a |
| (a. a.icani,                            |                          |                   |               | amended filing       |

### Official Form 106G

### **Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

|     | Person or | company with<br>Name, Number | whom you have the<br>, Street, City, State and ZIP C | contract or lease | State what the contract or lease is for |
|-----|-----------|------------------------------|--|-------------------|---|
| 2.1 |           |                              |  |                   |   |
|     | Name      |                              |  |                   | _                                       |
|     |           |                              |  |                   |   |
|     | Number    | Street                       |  |                   |   |
|     | City      |                              | State  | ZIP Code          | <del>_</del>                            |
| 2.2 |           |                              |  |                   |   |
| 2.2 | Name      |                              |  |                   | _                                       |
|     |           |                              |  |                   |   |
|     | Number    | Street                       |  |                   | _                                       |
|     | City      |                              | State  | ZIP Code          | <del>_</del>                            |
| 2.3 | Oity      |                              | Otate  | Zii Code          |   |
| 2.3 |           |                              |  |                   | _                                       |
|     | Name      |                              |  |                   |   |
|     |           |                              |  |                   |   |
|     | Number    | Street                       |  |                   | <del>_</del>                            |
|     | Number    | Olleet                       |  |                   |   |
|     | City      |                              | State  | ZIP Code          | <del>_</del>                            |
| 0.4 | City      |                              | State  | ZIF Code          |   |
| 2.4 |           |                              |  |                   | _                                       |
|     | Name      |                              |  |                   |   |
|     |           |                              |  |                   |   |
|     | Number    | Street                       |  |                   | _                                       |
|     | Number    | Sileet                       |  |                   |   |
|     | City      |                              | State  | ZIP Code          | _                                       |
|     | City      |                              | Sidle  | ZIP Code          |   |
| 2.5 |           |                              |  |                   | _                                       |
|     | Name      |                              |  |                   |   |
|     |           |                              |  |                   |   |
|     | Number    | Street                       |  |                   | <u> </u>                                |
|     | MULLIDEL  | Gueer                        |  |                   |   |
|     | City      |                              | State  | ZIP Code          | _                                       |
|     | City      |                              | Sidie  | ZIF Code          |   |

|                               |   | Docume   | nt Page 26 c              | of 49   |          |
|-------------------------------|---|--|---------------------------|---|----------|
| Fill in this                  | information to identify your  | case:  |                           |   |          |
| Debtor 1                      | Stoycho Ivanov  |  |                           |   |          |
| Dobtor 2                      | First Name  | Middle Name  | Last Name                 |   |          |
| Debtor 2<br>(Spouse if, filin | g) First Name   | Middle Name  | Last Name                 |   |          |
| United Stat                   | es Bankruptcy Court for the:  | NORTHERN DISTRICT                                    | OF ILLINOIS               |   |          |
| Case numb                     | per   |  |                           | ☐ Check if this is an   |          |
|                               |   |  |                           | amended filing  |          |
| Official                      | Form 106H   |  |                           |   |          |
|                               | ule H: Your Cod   | obtors   |                           | 42/41   | _        |
| Scried                        | ule II. Toul Cou  | EDIOI 2  |                           | 12/15   | <u> </u> |
| fill it out, ar<br>your name  |   | boxes on the left. Attack<br>. Answer every question | n the Additional Page t   | tion. If more space is needed, copy the Additional Pa<br>to this page. On the top of any Additional Pages, writ   |          |
| 1. БО у                       | ou have any codebiors: (  | you are ming a joint case,                           | do not list either spouse | e as a codebior.  |          |
| ■ No<br>□ Yes                 |   |  |                           |   |          |
|                               | nin the last 8 years, have you<br>a, California, Idaho, Louisiana,  |  |                           | ry? (Community property states and territories include ington, and Wisconsin.)  |          |
|                               | Go to line 3.  Did your spouse, former spor                         | use, or legal equivalent live                        | e with you at the time?   |   |          |
| in line<br>Form 1             | 2 again as a codebtor only i  | if that person is a guarar                           | ntor or cosigner. Make    | r if your spouse is filing with you. List the person she<br>sure you have listed the creditor on Schedule D (Off<br>06G). Use Schedule D, Schedule E/F, or Schedule G | icial    |
|                               | Column 1: Your codebtor<br>lame, Number, Street, City, State and Zl | IP Code  |                           | Column 2: The creditor to whom you owe the del<br>Check all schedules that apply:   | bt       |
| 3.1                           |   |  |                           | ☐ Schedule D, line  |          |
|                               | Name  |  |                           | ☐ Schedule E/F, line  |          |
|                               |   |  |                           | ☐ Schedule G, line  |          |
|                               | Number Street<br>City   | State  | ZIP Code                  | _   |          |
| 3.2                           |   |  |                           | ☐ Schedule D, line  |          |
|                               | Name  |  |                           | Schedule E/F, line  |          |
|                               |   |  |                           | ☐ Schedule G, line  |          |
|                               | Number Street   |  |                           | _   |          |
|                               | City  | State  | ZIP Code                  |   |          |

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| Fill        | in this information to identify your  | case.  |                                       |             |     | I                      |                           |                                |                                 |                         |
|-------------|---|--|---------------------------------------|-------------|-----|------------------------|---------------------------|--------------------------------|---------------------------------|-------------------------|
|             | btor 1 Stoycho Iva  |  |                                       |             |     |                        |                           |                                |                                 |                         |
|             | otor 2<br>buse, if filing)  |  |                                       |             | _   |                        |                           |                                |                                 |                         |
| Uni         | ted States Bankruptcy Court for th  | e: NORTHERN DISTRI                                     | CT OF ILLINOIS                        |             |     |                        |                           |                                |                                 |                         |
|             | se number<br>nown)  |  | -                                     |             |     | ☐ An                   |                           | ed filing<br>ent showing       | g postpetitior<br>ollowing date |                         |
| 0           | fficial Form 106l   |  |                                       |             |     | M                      | M / DD/ Y                 | YYY                            |                                 |                         |
| S           | chedule I: Your Inc   | ome  |                                       |             |     |                        |                           |                                |                                 | 12/15                   |
| spo<br>atta | plying correct information. If youse. If you are separated and yoch a separate sheet to this form  Describe Employment  Fill in your employment | ur spouse is not filing w<br>. On the top of any addit | ith you, do not inclu                 | de infor    | mat | ion about<br>d case nu | your sp<br>mber (if       | ouse. If m<br>known). <i>A</i> | ore space is<br>Answer ever     | s needed,<br>y questior |
| •           | information.  |  | Debtor 1                              |             |     |                        |                           |                                | ling spouse                     |                         |
|             | If you have more than one job, attach a separate page with  | Employment status                                      | ■ Employed                            |             |     |                        | ☐ Employed ☐ Not employed |                                |                                 |                         |
|             | information about additional employers.   |  | ☐ Not employed                        |             |     |                        | □ Not e                   | прюуеа                         |                                 |                         |
|             | Include part-time, seasonal, or   | Occupation   | Truck Driver                          |             |     |                        |                           |                                |                                 |                         |
|             | self-employed work.   | Employer's name  | SDI Trucking, In                      | c.          |     |                        |                           |                                |                                 |                         |
|             | Occupation may include student or homemaker, if it applies.   | Employer's address                                     | 3 Cour Masson A<br>Palos Hills, IL 60 |             |     |                        |                           |                                |                                 |                         |
|             |   | How long employed t                                    | here?                                 |             |     |                        | _                         |                                |                                 |                         |
| Par         | t 2: Give Details About Mo  | onthly Income  |                                       |             |     |                        |                           |                                |                                 |                         |
|             | mate monthly income as of the use unless you are separated.   | date you file this form. If                            | you have nothing to re                | eport for   | any | line, write            | \$0 in the                | e space. In                    | clude your no                   | on-filing               |
|             | ou or your non-filing spouse have n<br>e space, attach a separate sheet t   |  | ombine the information                | n for all e | emp | loyers for t           | that pers                 | on on the I                    | ines below. I                   | f you need              |
|             |   |  |                                       |             |     | For Debt               | tor 1                     |                                | btor 2 or<br>ng spouse          |                         |
| 2.          | List monthly gross wages, sal deductions). If not paid monthly  |  |                                       | 2.          | \$  |                        | 0.00                      | \$                             | N/A                             | =                       |
| 3.          | Estimate and list monthly over  | rtime pay.   |                                       | 3.          | +\$ |                        | 0.00                      | +\$                            | N/A                             | -                       |
| 4           | Calculate gross Income Add  | line 2 + line 3  |                                       | 4           | \$  |                        | 0.00                      | \$                             | N/A                             |                         |

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| Debto | or 1 Stoycho Ivanov   | _                 | Case              | number ( <i>if known</i> ) |                |                        |              |
|-------|---|-------------------|-------------------|----------------------------|----------------|------------------------|--------------|
|       |   |                   |                   | Debtor 1                   |                | otor 2 or<br>ng spouse |              |
|       | Copy line 4 here  | 4.                | \$_               | 0.00                       | \$             | N/A                    |              |
| 5.    | List all payroll deductions:  |                   |                   |                            |                |                        |              |
|       | <ul> <li>5a. Tax, Medicare, and Social Security deductions</li> <li>5b. Mandatory contributions for retirement plans</li> <li>5c. Voluntary contributions for retirement plans</li> </ul>   | 5a.<br>5b.<br>5c. | \$_<br>\$_<br>\$  | 0.00<br>0.00<br>0.00       | \$<br><br>\$   | N/A<br>N/A<br>N/A      |              |
|       | 5d. Required repayments of retirement fund loans 5e. Insurance 5f. Domestic support obligations   | 5d.<br>5e.<br>5f. | \$_<br>\$_<br>\$_ | 0.00<br>0.00<br>0.00       | \$<br>\$<br>\$ | N/A<br>N/A<br>N/A      |              |
|       | 5g. Union dues 5h. Other deductions. Specify:   | 5g.<br>5h.+       | \$                | 0.00                       | \$             | N/A<br>N/A             |              |
| 6.    | Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.  | 6.                | \$                | 0.00                       | \$             | N/A                    |              |
| 7.    | Calculate total monthly take-home pay. Subtract line 6 from line 4.   | 7.                | \$                | 0.00                       | \$             | N/A                    |              |
|       | List all other income regularly received:  8a. Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total                          |                   |                   |                            |                |                        |              |
|       | monthly net income.  8b. Interest and dividends   | 8a.               | \$_<br>\$         | 2,100.00                   | \$             | N/A                    |              |
|       | 8c. Family support payments that you, a non-filing spouse, or a depender regularly receive Include alimony, spousal support, child support, maintenance, divorce  |                   | ·_                | 0.00                       | ·              | N/A                    |              |
|       | settlement, and property settlement.  | 8c.               | \$_               | 0.00                       | \$             | N/A                    |              |
|       | 8d. Unemployment compensation 8e. Social Security   | 8d.<br>8e.        | \$_<br>\$         | 0.00                       | \$             | N/A<br>N/A             |              |
|       | 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:                   |                   | \$                | 0.00                       | \$             | N/A                    |              |
|       | 8g. Pension or retirement income  | 8g.               | \$                | 0.00                       | \$             | N/A                    |              |
|       | 8h. Other monthly income. Specify:  | 8h.+              | \$                | 0.00                       | + \$           | N/A                    |              |
| 9.    | Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.  | 9.                | \$                | 2,100.00                   | \$             | N/A                    |              |
|       | Calculate monthly income. Add line 7 + line 9.  Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.  | 10. \$            |                   | 2,100.00 + \$_             | N              | <b>I/A</b> = \$        | 2,100.00     |
|       | State all other regular contributions to the expenses that you list in <i>Schedu</i> . Include contributions from an unmarried partner, members of your household, you other friends or relatives.  Do not include any amounts already included in lines 2-10 or amounts that are no Specify: | ur depen          |                   | •                          | ed in Scho     | edule J.<br>11. +\$    | 0.00         |
|       | Add the amount in the last column of line 10 to the amount in line 11. The rewrite that amount on the Summary of Schedules and Statistical Summary of Certapplies   |                   |                   |                            | a. if it       |                        | 2,100.00     |
|       | Do you expect an increase or decrease within the year after you file this form  ■ No. □ Yes. Explain:   | n?                |                   |                            |                | Combin<br>monthly      | ed<br>income |

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| Fill       | in this informa                 | tion to identify yo                                 | our case:               |  |              |                                     |             |          |                 |  |       |
|------------|---------------------------------|---|-------------------------|--|--------------|-------------------------------------|-------------|----------|-----------------|--|-------|
| Deb        |                                 | Stoycho Ivar  |                         |  |              |                                     | Cr          |          | this is:        |  |       |
|            | tor 2<br>ouse, if filing)       |   |                         |  |              |                                     |             | As       | supplement show | ving postpetition cha<br>the following date: | pter  |
| Unit       | ed States Bankri                | uptcy Court for the:                                | NORTH                   | IERN DISTRICT OF IL                                  | LLINOIS      |                                     |             | MM       | // DD / YYYY    |  |       |
| 1          | e number<br>nown)               |   |                         |  |              |                                     |             |          |                 |  |       |
| Of         | fficial Fo                      | rm 106J   |                         |  |              |                                     |             |          |                 |  |       |
| Sc         | chedule                         | J: Your   | Exper                   | ises   |              |                                     |             |          |                 |  | 12/15 |
| info       | ormation. If m                  |   | eded, atta              | . If two married peop<br>ich another sheet to<br>n.  |              |                                     |             |          |                 |  |       |
| Par        |                                 | ibe Your House                                      | hold                    |  |              |                                     |             |          |                 |  |       |
| 1.         | Is this a join                  |   |                         |  |              |                                     |             |          |                 |  |       |
|            | ■ No. Go to                     |   | in a conor              | ate household?                                       |              |                                     |             |          |                 |  |       |
|            |                                 |   | iii a Sepai             | ate nousenoid?                                       |              |                                     |             |          |                 |  |       |
|            |                                 |   | st file Offic           | ial Form 106J-2, <i>Expe</i>                         | enses for S  | Senarate Housi                      | ehold of D  | )ehtor   | 2               |  |       |
|            |                                 |   | _                       | 1000 Z, ZAPO   | 771000 TOT C | σοραταίο πουσ                       | 011010 01 0 | CDIO     | <b>-</b> .      |  |       |
| 2.         | •                               | e dependents?                                       | ☐ No                    |  |              |                                     |             |          |                 |  |       |
|            | Do not list Do and Debtor 2     |   | Yes.                    | Fill out this information f each dependent           |              | pendent's relation btor 1 or Debtor |             | _        | Dependent's age | Does dependent live with you?                |       |
|            | Do not state                    |   |                         |  | 0-           |                                     |             |          | 00              | □ No   |       |
|            | dependents                      | names.  |                         |  | Sc           | on                                  |             |          | 20              | ■ Yes  |       |
|            |                                 |   |                         |  |              |                                     |             |          |                 | □ No<br>□ Yes                                |       |
|            |                                 |   |                         |  |              |                                     |             |          |                 | □ No   |       |
|            |                                 |   |                         |  |              |                                     |             |          |                 | ☐ Yes  |       |
|            |                                 |   |                         |  |              |                                     |             |          |                 | □ No   |       |
|            | _                               |   |                         |  |              |                                     |             |          |                 | ☐ Yes  |       |
| 3.         | expenses of                     | enses include<br>f people other t<br>d your depende | han $_{m \Box}$         | No<br>Yes  |              |                                     |             |          |                 |  |       |
| Par        | t 2: Estim                      | ate Your Ongoi                                      | ng Month                | ly Expenses  |              |                                     |             |          |                 |  |       |
| Est<br>exp | imate your ex                   |   |                         | uptcy filing date unle<br>y is filed. If this is a s |              |                                     |             |          |                 |  |       |
| Incl       | lude expense                    | s paid for with                                     | non-cash                | government assistar                                  | nce if you   | know                                |             |          |                 |  |       |
|            | value of such<br>ficial Form 10 |   | d have ind              | cluded it on <i>Schedul</i>                          | le I: Your I | Income                              |             | _        | Your expe       | enses  |       |
| 4.         | The rental o                    | or home owners<br>and any rent for th               | hip expen<br>e ground o | ses for your residen                                 | ice. Include | e first mortgag                     | e 4.        | \$_      |                 | 1,353.87                                     |       |
|            | If not includ                   | led in line 4:                                      |                         |  |              |                                     |             |          |                 |  |       |
|            | 4a. Real e                      | estate taxes  |                         |  |              |                                     | 4a.         | \$       |                 | 0.00   |       |
|            |                                 | rty, homeowner's                                    |                         |  |              |                                     | 4b.         | · : —    |                 | 0.00   |       |
|            |                                 | maintenance, re<br>owner's associat                 |                         | upkeep expenses                                      |              |                                     | 4c.<br>4d.  |          |                 | 0.00   |       |
| 5.         |                                 |   |                         | oominium dues<br>our residence, such a               | as home ed   | guity loans                         |             | \$<br>\$ |                 | 162.00<br>205.00                             |       |
|            |                                 |   | ,                       |  |              |                                     | -           |          |                 |  |       |

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| ,00101            | Stoycho                         | olvanov   | Case num            | ber (if known) |                            |
|-------------------|---------------------------------|---|---------------------|----------------|----------------------------|
| S. U              | Itilities:                      |   |                     |                |                            |
| _                 |                                 | /, heat, natural gas  | 6a.                 | \$             | 115.00                     |
|                   |                                 | ewer, garbage collection  | 6b.                 |                | 0.00                       |
| 6                 | -                               | e, cell phone, Internet, satellite, and cable services  | 6c.                 |                | 185.00                     |
|                   | d. Other. Sp                    |   | 6d.                 | •              | 0.00                       |
| _                 |                                 | sekeeping supplies  | 7.                  | \$             | 600.00                     |
|                   |                                 | children's education costs  | 8.                  | \$             | 0.00                       |
| _                 |                                 | dry, and dry cleaning   | 9.                  |                | 100.00                     |
|                   | _                               | products and services   | 10.                 | ·              | 80.00                      |
|                   |                                 | ental expenses  | 11.                 | · -            | 145.00                     |
|                   |                                 | Include gas, maintenance, bus or train fare.  |                     | Ψ              | 145.00                     |
|                   | o not include o                 |   | 12.                 | \$             | 200.00                     |
|                   |                                 | clubs, recreation, newspapers, magazines, and books   | 13.                 | \$             | 0.00                       |
|                   |                                 | tributions and religious donations  | 14.                 |                | 0.00                       |
|                   | nsurance.                       |   |                     | <u> </u>       | 0.00                       |
|                   |                                 | nsurance deducted from your pay or included in lines 4 or 20.   |                     |                |                            |
|                   | 5a. Life insura                 |   | 15a.                | \$             | 0.00                       |
| 1                 | 5b. Health ins                  | surance   | 15b.                |                | 0.00                       |
| 1                 | 5c. Vehicle in                  | nsurance  | 15c.                | ·              | 0.00                       |
| 1                 | 5d. Other ins                   | urance. Specify:  | 15d.                | ·              | 0.00                       |
|                   |                                 | nclude taxes deducted from your pay or included in lines 4 or 2   |                     | *              | 0.00                       |
|                   | specify:                        |   | 16.                 | \$             | 0.00                       |
|                   |                                 | lease payments:   |                     | * -            | 0.00                       |
|                   |                                 | nents for Vehicle 1   | 17a.                | \$             | 0.00                       |
| 1                 | 7b. Car paym                    | nents for Vehicle 2   | 17b.                | \$             | 0.00                       |
|                   | 7c. Other. Sp                   |   | 17c.                | \$             | 0.00                       |
|                   | 7d. Other. Sp                   |   | 17d.                | · -            | 0.00                       |
|                   |                                 | s of alimony, maintenance, and support that you did not re  |                     |                | 0.00                       |
|                   |                                 | your pay on line 5, Schedule I, Your Income (Official Form  |                     | \$             | 0.00                       |
| э. <b>С</b>       | ther payment                    | s you make to support others who do not live with you.  |                     | \$             | 0.00                       |
|                   | specify:                        |   | 19.                 |                |                            |
| ). <b>C</b>       | ther real prop                  | perty expenses not included in lines 4 or 5 of this form or o   | n Schedule I: Y     | our Income.    |                            |
|                   |                                 | es on other property  | 20a.                |                | 0.00                       |
| 2                 | 0b. Real esta                   | ate taxes   | 20b.                | \$             | 0.00                       |
| 2                 | 0c. Property,                   | homeowner's, or renter's insurance  | 20c.                | \$             | 0.00                       |
| 2                 | 0d. Maintena                    | nce, repair, and upkeep expenses  | 20d.                | \$             | 0.00                       |
|                   |                                 | ner's association or condominium dues   | 20e.                | \$             | 0.00                       |
|                   | Other: Specify:                 |   |                     | +\$            | 0.00                       |
| •                 | cinon openny.                   |   |                     |                | 0.00                       |
|                   |                                 | monthly expenses  |                     |                |                            |
|                   | 2a. Add lines 4                 | •   |                     | \$             | 3,145.87                   |
| 2                 | 2b. Copy line 2                 | 22 (monthly expenses for Debtor 2), if any, from Official Form 1  | 06J-2               | \$             |                            |
| 2                 | 2c. Add line 22                 | 2a and 22b. The result is your monthly expenses.  |                     | \$             | 3,145.87                   |
|                   |                                 |   |                     |                | <u>,</u>                   |
|                   | •                               | monthly net income.   |                     | •              |                            |
|                   |                                 | 12 (your combined monthly income) from Schedule I.  | 23a.                |                | 2,100.00                   |
| 2                 | 3b. Copy you                    | r monthly expenses from line 22c above.   | 23b.                | -\$            | 3,145.87                   |
|                   |                                 |   |                     |                |                            |
|                   |                                 | your monthly expenses from your monthly income.   | 220                 | \$             | -1,045.87                  |
| 2                 |                                 | It is your monthly net income.  | 23c.                | Ψ              | 1,070.07                   |
| 2                 | The resul                       |   |                     |                |                            |
|                   |                                 | an increase or decrease in your expenses within the year  | after you file this | s form?        |                            |
| 4. D              | o you expect                    | an increase or decrease in your expenses within the year a  |                     |                | e or decrease because of a |
| 4. <b>D</b>       | o you expect or example, do you | an increase or decrease in your expenses within the year a ou expect to finish paying for your car loan within the year or do you expeterms of your mortgage? |                     |                | e or decrease because of a |
| 24. <b>D</b><br>F | o you expect or example, do you | ou expect to finish paying for your car loan within the year or do you expe   |                     |                | e or decrease because of a |

page 2

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| Debtor 1            | Stoycho Ivanov          |                     |             |                                    |
|---------------------|-------------------------|---------------------|-------------|------------------------------------|
|                     | First Name              | Middle Name         | Last Name   |                                    |
| Debtor 2            |                         |                     |             |                                    |
| (Spouse if, filing) | First Name              | Middle Name         | Last Name   |                                    |
| United States Ba    | ankruptcy Court for the | : NORTHERN DISTRICT | OF ILLINOIS |                                    |
| Case number _       |                         |                     |             |                                    |
| (if known)          |                         |                     |             | Check if this is ar amended filing |

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

|     | Sign Below  |       |   |  |  |  |  |  |  |  |
|-----|---|-------|---|--|--|--|--|--|--|--|
| Die | Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms? |       |   |  |  |  |  |  |  |  |
|     | No  |       |   |  |  |  |  |  |  |  |
|     | Yes. Name of person   |       | . Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). |  |  |  |  |  |  |  |
|     | der penalty of perjury, I declare that I have read the summary at they are true and correct.      | and s | schedules filed with this declaration and   |  |  |  |  |  |  |  |
| X   | /s/ Stoycho Ivanov  | X     |   |  |  |  |  |  |  |  |
|     | Stoycho Ivanov Signature of Debtor 1  |       | Signature of Debtor 2   |  |  |  |  |  |  |  |
|     | Date March 2, 2016  |       | Date  |  |  |  |  |  |  |  |

Official Form 106Dec

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| Fill in       | this inform    | nation to identify you                     | r case:  |   |   |   |
|---------------|----------------|--|--|---|---|---|
| Debto         | r 1            | Stoycho Ivanov                             |  |   |   |   |
| Dobio         |                | First Name                                 | Middle Name  | Last Name   |   |   |
| Debto         |                | First Name                                 | Middle Norse   | Last Name   |   |   |
| (Spouse       | e if, filing)  | First Name                                 | Middle Name  | Last Name   |   |   |
| United        | d States Bar   | kruptcy Court for the:                     | NORTHERN DISTRICT C  | OF ILLINOIS   |   |   |
| Case (if know | number         |  |  |   |   | Check if this is an                                   |
|               |                |  |  |   | a   | mended filing   |
| Offi,         | oial Ear       | m 107                                      |  |   |   |   |
|               | cial For       |  | Affairs for Individ  | luale Filing for B                                    | ankruntov   | 40/4  |
|               |                |  |  |   |   | 12/1:   |
|               |                |  |  |   | equally responsible for sup<br>y additional pages, write yo |   |
|               |                | ). Answer every que                        |  |   | , , , , , .   |   |
| Part 1        | Give D         | etails About Your Ma                       | rital Status and Where You   | Lived Before  |   |   |
|               |                | current marital statu                      |  |   |   |   |
| ••            | -              | carrent maritar state                      |  |   |   |   |
|               | I Married ■ N  |  |  |   |   |   |
|               | Not marr       | ried                                       |  |   |   |   |
| 2. D          | uring the la   | st 3 years, have you                       | lived anywhere other than  | where you live now?                                   |   |   |
|               | No             |  |  |   |   |   |
|               | Yes. List      | all of the places you                      | ived in the last 3 years. Do n   | ot include where you live nov                         | ٧.  |   |
| C             | Debtor 1 Pri   | or Address:                                | Dates Debtor 1 lived there   | Debtor 2 Prior Ad                                     | dress:  | Dates Debtor 2<br>lived there                         |
| 3. W          | ithin the la   | st 8 years, did you e                      | ver live with a spouse or leg  | gal equivalent in a commu                             | nity property state or territor                             | r <b>y?</b> (Community propen                         |
|               |                |  |  |   | ico, Texas, Washington and \                                |   |
|               | No             |  |  |   |   |   |
|               |                | ke sure you fill out Sci                   | nedule H: Your Codebtors (O  | fficial Form 106H).                                   |   |   |
| Dowt 0        | - Francis      | the Courses of Vou                         |  |   |   |   |
| Part 2        | Explair        | n the Sources of You                       | r income   |   |   |   |
| Fi            | II in the tota | I amount of income yo                      | nployment or from operating ureceived from all jobs and a have income that you receive | all businesses, including part                        |   | endar years?  |
|               | ] No           |  |  |   |   |   |
|               |                | in the details.                            |  |   |   |   |
|               |                |  |  |   |   |   |
|               |                |  | Debtor 1   |   | Debtor 2  |   |
|               |                |  | Sources of income<br>Check all that apply.   | Gross income<br>(before deductions and<br>exclusions) | Sources of income<br>Check all that apply.                  | Gross income<br>(before deductions<br>and exclusions) |
|               |                | of current year until<br>I for bankruptcy: | ☐ Wages, commissions, bonuses, tips  | \$6,000.00  | ☐ Wages, commissions, bonuses, tips                         |   |
|               |                |  | Operating a business   |   | ☐ Operating a business                                      |   |

Official Form 107

Debtor 1 Stoycho Ivanov Document Page 33 of 49
Case number (if known)

|   |   |   |  | Debtor 1  |  |   | ı                                    | Debtor 2                           |                                |   |
|---|---|---|--|---|--|---|--------------------------------------|------------------------------------|--------------------------------|---|
|   |   |   |  | Sources of income<br>Check all that apply   | ,.                                       | Gross income<br>(before deductions a<br>exclusions)                     |                                      | Sources of inc<br>Check all that a |                                | Gross income<br>(before deductions<br>and exclusions) |
| For last calendar year:<br>(January 1 to December 31, 2015) |   | ☐ Wages, commissions, bonuses, tips         |  | \$26,257  |  | ☐ Wages, componuses, tips   | imissions,                           |                                    |                                |   |
|   |   |   |  | Operating a busing  | iness                                    |   | I                                    | ☐ Operating a                      | business                       |   |
|   | r the calen<br>anuary 1 to                              |   |  | ☐ Wages, commis bonuses, tips   | sions,                                   | \$34,120  |                                      | ☐ Wages, componuses, tips          | nmissions,                     |   |
|   |   |   |  | Operating a bus   | iness                                    |   | I                                    | Operating a                        | business                       |   |
| 5.  | Include incurrence include incurrence unemploy gambling | come regard<br>ment, and o<br>and lottery v | dless of whet<br>ther public b<br>vinnings. If y | ne during this year or<br>her that income is tax-<br>enefit payments; pens<br>ou are filing a joint cas<br>ome from each source | able. Exam<br>ions; rental<br>se and you | ples of other income<br>income; interest; diversed have income that you | e are alim<br>vidends;<br>ou receive | money collected together, list     | ed from laws<br>t it only once | uits; royalties; and                                  |
|   | _   | source and                                  | ine gross ine                                    | ome nom each source   | o ocparator                              | y. Do not include inc   | orne tria                            | t you listed iii li                | 110 4.                         |   |
|   | ■ No<br>□ Yes.  | Fill in the de                              | etails.  |   |  |   |                                      |                                    |                                |   |
|   |   |   |  | Debtor 1  |  |   |                                      | Debtor 2                           |                                |   |
|   |   |   |  | Sources of income<br>Describe below   |  | Gross income<br>(before deductions a<br>exclusions)                     |                                      | Sources of inc<br>Describe below   |                                | Gross income<br>(before deductions<br>and exclusions) |
| Pa  | rt 3: List  | Certain Pa                                  | ıyments You                                      | ı Made Before You F   | iled for Ba                              | nkruptcy  |                                      |                                    |                                |   |
| 6.  | □ No.   | Neither D<br>individual                     | ebtor 1 nor lorimarily for a                     | a personal, family, or h<br>ore you filed for bankr   | ly consum<br>nousehold p                 | er debts. Consumer<br>ourpose."   |                                      |                                    | _                              | 01(8) as "incurred by an                              |
|   |   | ☐ Yes                                       | paid that c<br>not include                       | each creditor to whom reditor. Do not include payments to an attornation on 4/01/16 and ever                                    | payments<br>ney for this                 | for domestic suppor bankruptcy case.                                    | t obligati                           | ions, such as c                    | hild support                   | and alimony. Also, do                                 |
|   | ■ Yes.  |   |  | or both have primaril<br>ore you filed for bankr  | •  |   | a total o                            | f \$600 or more                    | ?                              |   |
|   |   | No.   | Go to line                                       |   |  |   |                                      |                                    |                                |   |
|   |   | □ Yes                                       | include pay                                      | each creditor to whom<br>yments for domestic s<br>/ for this bankruptcy ca  | upport oblig                             |   |                                      |                                    |                                |   |
|   | Creditor  | s Name an                                   | d Address  | Dates of  | f payment                                | Total amoui<br>pai  |                                      | Amount you still owe               | Was this                       | payment for   |
| 7.  | Insiders in corporatio including of support ar          | clude your<br>ns of which                   | relatives; any<br>you are an c                   | r bankruptcy, did you<br>general partners; rela<br>fficer, director, person<br>perate as a sole propr                           | atives of an                             | y general partners; p<br>or owner of 20% or                             | partnersh<br>more of                 | nips of which you                  | ou are a general curities; and | eral partner;<br>any managing agent,                  |
|   | ■ No □ Yes.   | List all pavr                               | nents to an i                                    | nsider  |  |   |                                      |                                    |                                |   |
|   |   | Name and                                    |  |   | f payment                                | Total amoui   |                                      | Amount you still owe               | Reason fo                      | or this payment                                       |

Case 16-07374 Doc 1 Filed 03/03/16 Entered 03/03/16 11:17:35 Desc Main Page 34 of 49 Document Case number (if known) Debtor 1 Stoycho Ivanov Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an 8. insider? Include payments on debts guaranteed or cosigned by an insider. No Yes. List all payments to an insider **Insider's Name and Address** Reason for this payment Dates of payment **Total amount** Amount you Include creditor's name still owe paid Part 4: Identify Legal Actions, Repossessions, and Foreclosures Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. Nο Yes. Fill in the details. Case title Nature of the case Court or agency Status of the case Case number foreclosure **Circuit Court Cook County** FNMAE v. Ivanov Pending 14 CH 08828 □ On appeal □ Concluded Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No Yes. Fill in the information below. **Creditor Name and Address** Describe the Property Date Value of the property **Explain what happened** 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? Nο П Yes. Fill in the details. **Creditor Name and Address** Describe the action the creditor took Date action was **Amount** taken

12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?

No

Yes

#### Part 5: List Certain Gifts and Contributions

13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?

Yes. Fill in the details for each gift.

Gifts with a total value of more than \$600 Describe the gifts Dates you gave Value per person the gifts Person to Whom You Gave the Gift and Address:

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Case number (if known)

14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total Describe what you contributed Dates you Value contributed more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code) Part 6: List Certain Losses Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? Nο Yes. Fill in the details. п Describe the property you lost and Describe any insurance coverage for the loss Date of your Value of property how the loss occurred loss lost Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Part 7: List Certain Payments or Transfers Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy.  $\square$  No Yes. Fill in the details. Person Who Was Paid Description and value of any property Date payment Amount of Address transferred or transfer was payment Email or website address made Person Who Made the Payment, if Not You Law Offices of David Freydin, Ltd. **Attorney Fees** various \$1,500.00 8707 Skokie Blvd Suite 305 Skokie, IL 60077 Skokie, IL 60077 david.freydin@freydinlaw.com 17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. Nο Yes. Fill in the details. Person Who Was Paid Date payment Description and value of any property Amount of **Address** transferred or transfer was payment made Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. No Yes. Fill in the details. **Person Who Received Transfer** Description and value of Describe any property or Date transfer was **Address** property transferred payments received or debts made paid in exchange

Debtor 1

Stoycho Ivanov

Person's relationship to you

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Stoycho Ivanov Debtor 1

| 19.   | Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.)  No Yes. Fill in the details. |  |                            |   |   |  |  |  |  |  |
|---|---|--|----------------------------|---|---|--|--|--|--|--|
|   | Name of trust   | Description and  | value of the prope         | rty transferred   | Date Transfer was made                        |  |  |  |  |  |
| Par   | List of Certain Financial Accounts, In  | struments, Safe Deposi   | it Boxes, and Stor         | age Units   |   |  |  |  |  |  |
| 20. Within 1 year before you filed for bankruptcy, sold, moved, or transferred? Include checking, savings, money market, or chouses, pension funds, cooperatives, associa  ■ No □ Yes. Fill in the details. |   | or other financial accou   | ınts; certificates c       | of deposit; shares in banks, o                            | •   |  |  |  |  |  |
|   | Name of Financial Institution and<br>Address (Number, Street, City, State and ZIP<br>Code)  | Last 4 digits of account number  | Type of account instrument | t or Date account was closed, sold, moved, or transferred | Last balance<br>before closing or<br>transfer |  |  |  |  |  |
| 21.   | Do you now have, or did you have within 1 cash, or other valuables?  No Yes. Fill in the details.  Name of Financial Institution  | year before you filed fo   |                            | safe deposit box or other de                              | epository for securities,  Do you still       |  |  |  |  |  |
|   | Address (Number, Street, City, State and ZIP Code)  | Address (Number, S<br>State and ZIP Code)                              |                            |   | have it?                                      |  |  |  |  |  |
| 22.   | Have you stored property in a storage unit  ■ No □ Yes. Fill in the details.  | or place other than you  | r home within 1 ye         | ear before you filed for bank                             | ruptcy  |  |  |  |  |  |
|   | Name of Storage Facility<br>Address (Number, Street, City, State and ZIP Code)  | Who else has or<br>to it?<br>Address (Number, S<br>State and ZIP Code) |                            | escribe the contents                                      | Do you still have it?                         |  |  |  |  |  |
| Par   | 9: Identify Property You Hold or Control  | for Someone Else   |                            |   |   |  |  |  |  |  |
| 23.   | Do you hold or control any property that so for someone.  No Yes. Fill in the details.  | omeone else owns? Incl   | ude any property           | you borrowed from, are stor                               | ing for, or hold in trust                     |  |  |  |  |  |
|   | Owner's Name<br>Address (Number, Street, City, State and ZIP Code)  | Where is the pro<br>(Number, Street, City, S<br>Code)                  |                            | escribe the property                                      | Value   |  |  |  |  |  |
| Par   | 10: Give Details About Environmental Inf  | formation  |                            |   |   |  |  |  |  |  |
| For   | the purpose of Part 10, the following definit   | ions apply:  |                            |   |   |  |  |  |  |  |

- Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

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Debtor 1 Stoycho Ivanov

| 24. | Has any governmental unit notified you that y   | ou may be liable or potentially liable                                  | e under or in violation of an environm                 | nental law?        |  |  |
|-----|---|---|--|--------------------|--|--|
|     | Yes. Fill in the details.   |   |  |                    |  |  |
|     | Name of site<br>Address (Number, Street, City, State and ZIP Code)                        | Governmental unit Address (Number, Street, City, State and ZIP Code)    | Environmental law, if you know it                      | Date of notice     |  |  |
| 25. | Have you notified any governmental unit of a  | ny release of hazardous material?                                       |  |                    |  |  |
|     | ■ No<br>□ Yes. Fill in the details.   |   |  |                    |  |  |
|     | Name of site<br>Address (Number, Street, City, State and ZIP Code)                        | Governmental unit Address (Number, Street, City, State and ZIP Code)    | Environmental law, if you know it                      | Date of notice     |  |  |
| 26. | Have you been a party in any judicial or admi   | nistrative proceeding under any envi                                    | ironmental law? Include settlements                    | and orders.        |  |  |
|     | ■ No □ Yes. Fill in the details.  |   |  |                    |  |  |
|     | Case Title<br>Case Number   | Court or agency Name Address (Number, Street, City, State and ZIP Code) | Nature of the case                                     | Status of the case |  |  |
| Par | 11: Give Details About Your Business or Co  | onnections to Any Business  |  |                    |  |  |
| 27. | Within 4 years before you filed for bankruptcy  | y, did you own a business or have ar                                    | ny of the following connections to an                  | y business?        |  |  |
|     | ☐ A sole proprietor or self-employed in   | a trade, profession, or other activity,                                 | , either full-time or part-time                        |                    |  |  |
|     | ☐ A member of a limited liability compa   | ny (LLC) or limited liability partnersh                                 | nip (LLP)  |                    |  |  |
|     | ☐ A partner in a partnership  |   |  |                    |  |  |
|     | ☐ An officer, director, or managing executive of a corporation                            |   |  |                    |  |  |
|     | ☐ An owner of at least 5% of the voting or equity securities of a corporation             |   |  |                    |  |  |
|     | ☐ No. None of the above applies. Go to Pa   | ırt 12.   |  |                    |  |  |
|     | Yes. Check all that apply above and fill in   | n the details below for each business                                   | s.   |                    |  |  |
|     |   | Describe the nature of the business                                     |  |                    |  |  |
|     | Address<br>(Number, Street, City, State and ZIP Code)                                     | Name of accountant or bookkeeper  | Do not include Social Security  Dates business existed | number or IIIN.    |  |  |
|     |   | rucking   | EIN: 27-0781282  |                    |  |  |
|     | 3 Cour Masson, Unit 3<br>Palos Hills, IL 60465  |   | From-To  |                    |  |  |
| 28. | Within 2 years before you filed for bankruptcy institutions, creditors, or other parties. | y, did you give a financial statement                                   | to anyone about your business? Incl                    | ude all financial  |  |  |
|     | ■ No  |   |  |                    |  |  |
|     | Yes. Fill in the details below.   |   |  |                    |  |  |
|     | Name Address (Number, Street, City, State and ZIP Code)                                   | Date Issued   |  |                    |  |  |
|     |   |   |  |                    |  |  |

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Debtor 1 Stoycho Ivanov

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I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both.

18 U.S.C. §§ 152, 1341, 1519, and 3571.

Is/ Stoycho Ivanov
Stoycho Ivanov
Signature of Debtor 1

Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?

Date

■ No

Date March 2, 2016

☐ Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

■ No

☐ Yes. Name of Person . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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| Fill in this info   |  |                           |                                 |   |
|---------------------|--|---------------------------|---------------------------------|---|
| Debtor 1            | rmation to identify your Stoycho Ivanov                | case:                     |                                 |   |
| Debior              | First Name   | Middle Name               | Last Name                       |   |
| Debtor 2            |  |                           |                                 |   |
| (Spouse if, filing) | First Name   | Middle Name               | Last Name                       |   |
| United States B     | ankruptcy Court for the:                               | NORTHERN DISTRICT         | OF ILLINOIS                     |   |
| Case number         |  |                           |                                 | Charle if this is an  |
| (II KIIOWII)        |  |                           |                                 | ☐ Check if this is an amended filing  |
| Official Fo         |  | n for Individu            | ıals Filing Under               | <b>Chapter 7</b> 12/15  |
|                     | dividual filing under cha                              | pter 7, you must fill out | this form if:                   |   |
| You must file th    | is form with the court v<br>ever is earlier, unless th |                           | ile your bankruptcy petition or | by the date set for the meeting of creditors,<br>d copies to the creditors and lessors you list |

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

### Part 1: List Your Creditors Who Have Secured Claims

1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below.

| Identify the creditor and the property that is collateral | What do you intend to do with the property that<br>secures a debt? | Did you claim the property as exempt on Schedule C? |
|---|--|---|
| Creditor's  | ☐ Surrender the property.  | □ No  |
| name:   | ☐ Retain the property and redeem it.                               |   |
| Description of  | Retain the property and enter into a Reaffirmation Agreement.      | ☐ Yes   |
| property  | ☐ Retain the property and [explain]:                               |   |
| securing debt:  |  |   |
| Creditor's  | ☐ Surrender the property.  | □ No  |
| name:   | ☐ Retain the property and redeem it.                               |   |
| Description of  | Retain the property and enter into a Reaffirmation Agreement.      | ☐ Yes   |
| property  | ☐ Retain the property and [explain]:                               |   |
| securing debt:  |  |   |
| Creditor's  | ☐ Surrender the property.  | □ No  |
| name:   | Retain the property and redeem it.                                 |   |
| Description of  | Retain the property and enter into a Reaffirmation Agreement.      | ☐ Yes   |
| property  | ☐ Retain the property and [explain]:                               |   |
| securing debt:  |  |   |
|   |  |   |

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

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| B8 (I      | Form 8) (12/08)  |   | Page 2                                  |
|------------|--|---|---|
|            | name:  | ☐ Retain the property and redeem it.  | ☐ Yes                                   |
|            | Description of   | ☐ Retain the property and enter into a  |   |
|            | Description of<br>property   | Reaffirmation Agreement.  |   |
|            | securing debt:   | ☐ Retain the property and [explain]:  |   |
|            |  |   | <del></del>                             |
|            | rt 2: List Your Unexpired Personal Prop  |   |   |
| in tl      | he information below. Do not list real estat   | at you listed in Schedule G: Executory Contracts and Unex<br>te leases. Unexpired leases are leases that are still in effec<br>erty lease if the trustee does not assume it. 11 U.S.C. § 36 | ct; the lease period has not yet ended. |
| De         | scribe your unexpired personal property le   | eases   | Will the lease be assumed?              |
|            | ssor's name:   |   | □ No                                    |
| _          | scription of leased  |   | <b></b>                                 |
| FIC        | operty:  |   | ☐ Yes                                   |
|            | ssor's name:   |   | □ No                                    |
| _          | scription of leased operty:  |   | ☐ Yes                                   |
|            |  |   |   |
|            | ssor's name:<br>scription of leased  |   | □ No                                    |
|            | operty:  |   | ☐ Yes                                   |
|            | ssor's name:   |   | □ No                                    |
|            | scription of leased operty:  |   | ☐ Yes                                   |
|            |  |   | □ 1 <i>e</i> 5                          |
|            | ssor's name:<br>scription of leased  |   | □ No                                    |
|            | operty:  |   | ☐ Yes                                   |
| Les        | ssor's name:   |   | □ No                                    |
| De         | scription of leased  |   | L No                                    |
| Pro        | pperty:  |   | ☐ Yes                                   |
|            | ssor's name:   |   | □ No                                    |
| _          | scription of leased pperty:  |   | ☐ Yes                                   |
| Pai        | rt 3: Sign Below   |   |   |
|            |  |   |   |
| ono<br>pro | der penalty of perjury, I declare that I have<br>perty that is subject to an unexpired lease | indicated my intention about any property of my estate the  | at secures a dept and any personal      |
| X          | /s/ Stoycho Ivanov   | x   |   |
|            | Stoycho Ivanov Signature of Debtor 1   | Signature of Debtor 2   |   |
|            | Date <b>March 2, 2016</b>  | Date  |   |
|            | Date Ivial CII 2, 2010   | Date  |   |

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

| Chapter 7: | Liquidation        |
|------------|--------------------|
| \$245      | filing fee         |
| \$75       | administrative fee |
| + \$15     | trustee surcharge  |
| \$335      | total fee          |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

### **Chapter 11: Reorganization**

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

### Chapter 12: Repayment plan for family farmers or fishermen

|   | \$200 | filing fee         |
|---|-------|--------------------|
| + | \$75  | administrative fee |
|   | \$275 | total fee          |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

|   | \$235 | filing fee         |
|---|-------|--------------------|
| + | \$75  | administrative fee |
|   | \$310 | total fee          |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure</a>.

### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

## Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc approved.html.

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCreditAndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 16-07374 Doc 1 Filed 03/03/16 Entered 03/03/16 11:17:35 Desc Main Document Page 45 of 49

B2030 (Form 2030) (12/15)

### **United States Bankruptcy Court** Northern District of Illinois

| In re | Stoycho Ivanov   |   | Case No.                    |  |  |
|-------|--|---|-----------------------------|--|--|
|       |  | Debtor(s)   | Chapter                     | 7  |  |
|       | DISCLOSURE OF COMPENSAT  | CION OF ATTOR   | NEY FOR DE                  | EBTOR(S)   |  |
| C     | Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I compensation paid to me within one year before the filing of the per rendered on behalf of the debtor(s) in contemplation of or in  | e petition in bankruptcy, o   | r agreed to be paid         | to me, for services rendered or to                     |  |
|       | For legal services, I have agreed to accept  |   | \$                          | 1,500.00   |  |
|       | Prior to the filing of this statement I have received  |   |                             | 1,500.00   |  |
|       | Balance Due  |   | . \$                        | 0.00   |  |
| 2. 7  | The source of the compensation paid to me was:   |   |                             |  |  |
|       | ■ Debtor □ Other (specify):  |   |                             |  |  |
| 3.    | The source of compensation to be paid to me is:  |   |                             |  |  |
|       | ■ Debtor □ Other (specify):  |   |                             |  |  |
| 4.    | I have not agreed to share the above-disclosed compensation  | n with any other person un  | nless they are mem          | bers and associates of my law firm.                    |  |
| I     | ☐ I have agreed to share the above-disclosed compensation wi copy of the agreement, together with a list of the names of the state of |   |                             |  |  |
| 5.    | In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:  |   |                             |  |  |
| b     | Preparation and filing of any petition, schedules, statement of Representation of the debtor in adversary proceedings and of [Other provisions as needed]  Negotiations with secured creditors to reduce reafficiation agreements and applications as  | ther contested bankruptcy<br>to market value; exen<br>needed; preparation a       | matters;                    | ; preparation and filing of<br>ions pursuant to 11 USC |  |
|       | 522(f)(2)(A) for avoidance of liens on household   | ia goods.   |                             |  |  |
| 6. I  | By agreement with the debtor(s), the above-disclosed fee does n  Representation of the debtors in any discharge any other adversary proceeding.  | ot include the following s<br>eability actions, judici                            | ervice:<br>al lien avoidanc | es, relief from stay actions or                        |  |
|       | CER  | TIFICATION  |                             |  |  |
|       | certify that the foregoing is a complete statement of any agreer ankruptcy proceeding.   | ment or arrangement for pa  | ayment to me for re         | epresentation of the debtor(s) in                      |  |
| М     | arch 2, 2016   | /s/ David Freydin   |                             |  |  |
|       | ate  | David Freydin Signature of Attorney Law Offices of Dav 8707 Skokie Blvd Suite 305 | id Freydin, Ltd.            |  |  |
|       |  | Skokie, IL 60077<br>847-630-3122 Fax:<br>david.freydin@frey<br>Name of law firm   |                             |  |  |

### **Bankruptcy Legal Services Agreement**

This is an Agreement between Stoycho Ivanov (the Client) and the LAW OFFICES OF DAVID FREYDIN, P.C., a debt relief agency that helps people file bankruptcy under the Bankruptcy Code, by which the Client agrees to pay for these services in the following manner:

The fees in this contract are based on the information given by the Client in the initial consultation. After reasonable investigation, as required by law, if the Law Firm determines that the information is substantially different, then the Law Firm retains the right to withdraw from this contract. If the Law Firm determines that the information is substantially different then the Law Firm may offer a new contract at a different rate or may refuse representation in total.

Based on the information provided in the initial consultation the Client agrees to pay the Law Firm \$1500 as a "Basic Flat Fee". The "Basic Flat Fee" does not include the cost of Personal Financial Management Instructional Courses (Debtor Education), the cost of Credit Counseling or any service not specifically listed in this contract. Part of the calculation that goes into the fee amount is based on the ability to file multiple cases as once. This is normally done at the end of the month. If the Debtor requires that the case be filed before the end of the month the Law Office may request an additional fee. If the Client sees fit to sign a new attorney-client agreement with the Law Firm for services to file and/ or prepare a new bankruptcy filing then this agreement shall be no longer be valid and the new one will control, unless the new contract for bankruptcy services specifically states otherwise. If the new attorney-client agreement is for any other service besides preparing and or filing a new bankruptcy filing then this agreement shall remain valid.

The flat fee shall apply only to cases that have been filed with the court. If the services of the Law Firm are terminated either by the requirements set by the Law Firm or by the Client then all funds provided to the Law Firm may be applied to work completed by the Law Firm in accordance with the Illinois Rules of Professional Conduct Rules 1.16(a) (4) and (e) based on the regular hourly rate.

The "Basic Flat Fee" covers the following services: A) preparation and filing of a Voluntary Petition for Chapter 7 Bankruptcy with no amendments; B) attendance at the first meeting with the trustee scheduled by the court and C) the Law Firm will provide one copy of the filed Bankruptcy Petition and the Discharge of Debtor if applicable. If the Law Firm or the Client decide to terminate this agreement then any funds provided to the Law Office by the Client shall not be refundable to the extent that the Law Firm earns them and the Law Firm can hold the Client owing for any work completed in accordance with the Illinois Rules of Professional Conduct Rules 1.16(a) (4) and (e) based on the regular hourly rate. The debtor must pay for any costs incurred for filing fees or the cost of "reasonable investigation" as provided by law.

The "Basic Flat Fee" only covers those services specifically listed above. All other services are to be provided at the rate of \$395 ("regular hourly rate") per hour billed in 0.2 hour increments. Support staff time at \$95 per hour billed in 0.2 hour increments. While the petition is being prepared, if the Client requests substantial changes to the petition (e.g. changing the case from a single person to a joint filing) or if the filing is delayed so that the petition needs to be revised, then the Law Firm will impose a additional fee based on the hourly rate for the change, however, the charge will be no less than \$475.

Certain aspects of the services provided may be completed by clerical staff or by licensed and qualified counsel retained by the Law Firm to aid in the efficient and competent completion of the services as contracted. LAW OFFICES OF DAVID FREYDIN, P.C., may not provide all of the services in the contract personally. The attorneys may not be associates or of counsel to the Law Firm. Other attorneys may be used based on necessity. All attorney work will be billed at the same hourly rate set out in this contract regardless of the compensation agreement between the performing attorney and the Law Firm.

The Client authorizes the Law Firm to begin work necessary for bankruptcy filing. The Client authorizes the Law Firm to respond to phone calls from creditors and provide information regarding the preparation and subsequent filing of the bankruptcy. The Client agrees to cooperate with the attorney in the preparation of the Bankruptcy Petition and provide complete, accurate and truthful information for each and every question. The Client must respond promptly to all correspondence with the Law Firm and provide updated address and telephone numbers. The Client agrees to provide complete disclosure and accurate replacement value for all assets.

The Law Firm is authorized to immediately withdraw from representing the Client under any of the following circumstances: A) the Client fails to cooperate with the Law Firm in the preparation and implementation of the Client's case; B) the Client fails to pay fees and costs as agreed; C) the Client makes misrepresentations or misleading statements to the Law Firm; D) the Client delays filing for two (2) months from signing this agreement without making arrangements with the Law Firm; E) the Client delays filing until circumstances change which affect the bankruptcy law or the process of filing; F) the Client fails to cooperate in the process of preparing the bankruptcy or pursuing the Bankruptcy Petition or G) the Law Firm feels compelled to withdraw based on law, court order or ethical reasons.

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All payment to the Law Firm shall constitute an "advance payment retainer". An advance payment retainer consists of a present payment to the Law Firm in exchange for the commitment to provide legal services in the future. Ownership of this retainer passes to the lawyer immediately upon payment. There exists the option to place funds provided to the Law Firm into a classic security retainer. However, this Attorney Client agreement does not provide for a classic security retainer due to the nature of the bankruptcy proceeding. Funds held under the classic security retainer may be subject to garnishment by creditors and could be seen as an asset by the bankruptcy court.

All documents and notes provided to the Law Firm may be destroyed at the Law Firm's discretion once the Law Firm has completed its representation of the client. The Law Office will impose a charge for replacing lost documents or sending copies of documents. The Client understands that in a Chapter 7 bankruptcy if they receive any substantial windfall within 180 days of filing they must report these amounts to the Chapter 7 Trustee and that these amounts may be taken by the Trustee to pay the debts listed in the bankruptcy.

The Client agrees to keep attorney informed of changes of address, phone number, etc. during the course of the Client's representation by the Law Firm. The Law Firm is not responsible for omissions or errors resulting from information from credit reports, regardless of whether the reports are obtained for the Client by the Law Firm. The Client is responsible for checking his/her petition at the time of signing to make sure that all information is correct and understood, and that all the creditors have been listed.

The Client acknowledges that the attorney is relying on the Client's representations as to the existence of assets and debts, the secured or unsecured nature of these debts as well as answer to all other questions on the petition. The Client understands that the Law Firm will not investigate the possible existence of existing liens against the Client's property or person. The Client understands that if any such liens pre-date the filing of the Bankruptcy Petition, it may not be possible to avoid such a lien and the Law Firm makes no representation that any such lien can be avoided. The Client understands that the attorney will not undertake any investigation to determine whether the creditors are secured or un-secured, but will rely upon representations from the Client as to any such security interests. The Client is responsible for paying for any costs incurred the preparation or prosecution of their case. The Client grants permission to the Law Firm to incur reasonable expenses on behalf of the Client towards the preparation and prosecution of this case for which the Client will be responsible.

In the event that this contract does not accurately reflect the representations by the attorney then it is important the Client not sign these documents until the corrections have been made. The Client acknowledges that no guarantees or assurances have been made by the Law Firm as to the disposition of the petition for bankruptcy. All comments by the attorney are expressions of opinion based upon experience as well as representations made by the Client. All expressions relative thereto are matters of opinion only.

If the Client sees fit to sign a new attorney-client agreement with the Law Firm for services to file and/ or prepare a new bankruptcy filing then this agreement shall be no longer be valid and the new one will control, unless the new contract for bankruptcy services specifically states otherwise. If the new attorney-client agreement is for any other service besides preparing and or filing a new bankruptcy filing then this agreement shall remain valid.

The Client has been informed that certain debts are not dischargeable in bankruptcy. The Law Firm can only offer an opinion on the dischargeability of debt based on the representations of the Client. This contract does not retain the Law Firm to investigate or litigate the determination of dischargability of a debt. The Client understands that Law Firm can make no representations as to the effect of bankruptcy filing on the creditor or credit reports of the Client, Client's spouse, or any co-debtor. The Law Firm is not retained to correct errors of credit reporting agencies. The Client has been informed that bankruptcy could have an effect on immigration, criminal, family law and other non-bankruptcy proceedings and that the Client should consult with an attorney to advise and assist them in these matters.

The Client acknowledges that they are solely responsible for the completion of both the credit counseling and the financial management courses required by the Bankruptcy Code. The Client has acknowledges that failure to complete the course in the set time could result in the case being closed without discharge of debt.

The Client has read this agreement and agrees with its terms and representations.

Stoyeho Ivanov

LAW OFFICES OF DAVID FREYDIN, P.C.:

## **United States Bankruptcy Court Northern District of Illinois**

|       |   | Northern District of Infinois            |                     |                           |
|-------|---|--|---------------------|---------------------------|
| In re | Stoycho Ivanov                            |  | Case No.            |                           |
|       |   | Debtor(s)                                | Chapter             | 7                         |
|       | VI  | ERIFICATION OF CREDITOR M                | MATRIX              |                           |
|       |   | Number of                                | f Creditors:        | 10                        |
|       | The above-named Debtor(s (our) knowledge. | ) hereby verifies that the list of credi | itors is true and o | correct to the best of my |
|       | March 2, 2016                             | /s/ Stoycho Ivanov                       |                     |                           |

Bank od America Nc4-105-03-14 Po Box 26012 Greensboro, NC 27410

Chase Card Services Attn: Correspondence Dept Po Box 15298 Wilmington, DE 19850

Chase Card Services Attn: Correspondence Dept Po Box 15298 Wilmington, DE 19850

Chase Home Finance PO BOX 78420 Phoenix, AZ 85062

Chase Mtg Po Box 24696 Columbus, OH 43224

Citibank / Sears Citicard Credit Srvs/Centralized Bankrup Po Box 790040 Saint Louis, MO 63179

Citibank/Best Buy Centralized Bankruptcy/CitiCorp Credit S Po Box 790040 St Louis, MO 63179

Citizens Bank Attn:Bankruptcy 443 Jefferson Blvd Ms Rjw-135 Warwick, RI 02886

Comenity Bank/Harlem Furniture Po Box 182125 Columbus, OH 43218

Seterus 14523 SW Millikan Way Suite 200 Beaverton, OR 97005